

# INVESTIGATION OF ST. ELIZABETHS HOSPITAL

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## LETTER

FROM

### THE COMPTROLLER GENERAL OF THE UNITED STATES

TRANSMITTING, PURSUANT TO HOUSE CONCURRENT  
RESOLUTION NO. 26, ADOPTED JULY 3, 1926, THE  
REPORT OF THE INVESTIGATION OF THE  
ADMINISTRATION OF ST. ELIZABETHS  
HOSPITAL SINCE JULY 1, 1926

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HOUSE OF REPRESENTATIVES

82nd Congress  
1st Session

# INVESTIGATION OF ST. ELIZABETH'S HOSPITAL

LETTER  
FROM  
THE COMPTROLLER GENERAL OF  
THE UNITED STATES

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## LETTER OF TRANSMITTAL

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WASHINGTON, *December 15, 1926.*

THE SPEAKER OF THE HOUSE OF REPRESENTATIVES.

SIR: I have the honor to submit the report of the investigation of the administration of St. Elizabeths Hospital since July 1, 1916, made pursuant to House Concurrent Resolution 26, passed July 3, 1926.

Respectfully,

J. R. McCARL,  
*Comptroller General of the United States.*

## LETTER OF TRANSMITTAL

WASHINGTON, December 15, 1930.

The SPEAKER OF THE HOUSE OF REPRESENTATIVES,  
SIR: I have the honor to submit the report of the investigation of  
the administration of St. Elizabeth's Hospital since July 1, 1918,  
made pursuant to House Concurrent Resolution 28, passed July 3,  
1928.

Respectfully,

J. R. McCARR, JR.  
Comptroller General of the United States.

# INVESTIGATION OF ST. ELIZABETHS HOSPITAL

## REPORT OF THE COMPTROLLER GENERAL OF THE UNITED STATES OF THE INVESTIGATION OF ST. ELIZABETHS HOSPITAL MADE PURSUANT TO HOUSE CONCURRENT RESOLUTION 26, PASSED JULY 3, 1926

DECEMBER 6, 1926.

### I. AUTHORITY FOR AND SCOPE OF INVESTIGATION

There is submitted the following report of the investigation of St. Elizabeths Hospital since July 1, 1916, which was made in compliance with House Concurrent Resolution 26, passed July 3, 1926, reading as follows:

*Resolved by the House of Representatives (the Senate concurring), That pursuant to the provisions of the act of June 10, 1921 (Forty-second Statutes, page 23), the Comptroller General of the United States be, and he is hereby, ordered, directed, and empowered to investigate the administration of Saint Elizabeths Hospital since July 1, 1916, including the administration of the personnel of the hospital, all receipts and expenditures, uses of appropriations, the extent and manner in which the officials thereof have performed their duties, the commitment, treatment, release, and discharge of patients, and the receiving, safeguarding, and disposition of funds and property of patients, and make report of such investigation to the House of Representatives on or before the beginning of the next regular session of the Congress, and the agents of the Comptroller General in acting hereunder are hereby empowered to subpoena witnesses and, in the examination of witnesses, to administer oaths.*

The investigation has been directed to all phases of the hospital's administration as authorized by the resolution.

In considering the "treatment" of patients the investigation has necessarily been limited to matters other than those involving the medical, surgical, and psychopathic phases thereof. So far as these latter are concerned inquiry has been confined to an ascertainment of the existing physical facilities and the number and general character, professional training, bearing, and interest of the personnel employed. No attempt has been made to reach a conclusion as to whether the numerical strength of the hospital staff is sufficient for the needs of the institution or in excess thereof.

The contact had with the hospital staff as a whole made a distinct impression that whole-hearted interest and earnestness pervades the institution in the matter of the care of patients and in seeking for causes of mental disorders and cures therefor.

### II. GENERAL STATEMENT AS TO THE PURPOSE AND LOCATION OF THE HOSPITAL, NUMBER OF PATIENTS, AND PERSONNEL

Act of March 3, 1855 (10 Stat. 682), provides that "There shall be in the District of Columbia a Government Hospital for the Insane, and its objects shall be the most humane care and enlightened curative treatment of the insane of the Army and Navy of the United



States and of the District of Columbia." The Government Hospital for the Insane was designated St. Elizabeths Hospital by act of Congress approved July 1, 1916 (39 Stat. 309).

St. Elizabeths Hospital is located on an elevation overlooking the Eastern Branch of the Potomac River, about 5 miles from the Capitol. Nichols Avenue with its street-car line divides the hospital grounds into two tracts, the one on the west side with 190 acres being known as Blagden farm, of which 25 acres are occupied by buildings and lawns; the other as Shepherd's tract, with 175 acres, of which 15 acres are used for buildings and lawns. There is a connecting tunnel under Nichols Avenue. A brick wall on the west side of Nichols Avenue and an iron fence on the east side, 10 by 7 feet high, respectively, prevent patients from wandering onto the car tracks.

That part of the land not set aside for buildings and lawns is utilized so far as possible for farming purposes. The hospital owns two additional farms, the Stephens tract of 60 acres in Congress Heights and the Godding Croft farm of 380 acres located on Oxon Run Creek, Md., about 5 miles from the hospital.

The hospital reports indicate that in 1900 there were 2,076 patients in the 28 buildings, which were intended to accommodate 1,600 patients, but with an excess of 476 beyond the capacity of the institution. During this same year Congress passed laws providing for the construction of 11 ward buildings and a nurses' home, 5 of the ward buildings to accommodate from 104 to 120 patients each and 6 each with a capacity of 40 to 60 patients. Provisions were also made for a cold-storage building, a kitchen, new stables, boring of artesian wells for supplying water to the hospital and for the construction of a switch track from the Baltimore & Ohio Railroad to the power house. In 1902 additional appropriations provided for a kitchen building, and a central heat, power, and lighting plant.

All the buildings provided for by appropriation acts of 1900 and 1902 were completed and occupied in 1904, the capacity of the hospital being increased to about 2,600 patients. Hitchcock Hall, an amusement hall for patients, costing \$104,000, was complete in 1910. A cow barn and piggery were constructed in 1915 at a cost of \$25,000. A wall around Howard Hall was constructed in 1915 at a cost of \$23,663. In 1914, 5 tubercular cottages, costing \$20,000, each to accommodate 20 patients, were completed.

The following buildings have been constructed since June 30, 1916:

Mechanical shop and storehouse, constructed by the hospital force, was completed in 1917, with an appropriation cost of \$24,500.

Seven semipermanent ward buildings with a total capacity of 504 patients; and a dining room and kitchen, were completed in 1919, at a cost of \$200,000.

A garage was constructed in 1920 by the hospital force with an appropriation cost of \$25,000.

Laboratory and quarantine buildings costing \$100,000 and \$28,500, respectively, were completed in 1924.

Seven cottages for staff physicians, at a total cost of \$46,500, were constructed in 1925. In 1920 the Red Cross and Knights of Columbus each furnished a building for their respective services. The Public Health Service supplied the hospital with four portables, now used as dental clinic, occupational therapy building, and cafeteria.



From time to time porches have been inclosed, the quarters formerly used by employees have been renovated and made into dormitories for patients, providing for an additional 100 beds, thus making the present normal capacity of the entire hospital 3,300, which it is believed is about the maximum number of patients for which the institution now has the facilities for proper care and accommodation.

The following table compiled from individual records shows the number of patients in the hospital as of June 30, 1915, and admissions, deaths, and discharges, and net gain for each succeeding fiscal year thereafter:

Fiscal year	Admissions	Deaths or discharges	In hospital	Gain
June 30—				
1915.....			3, 076	-----
1916.....	815	689	3, 193	117
1917.....	898	847	3, 244	51
1918.....	1, 054	923	3, 375	131
1919.....	1, 802	1, 591	3, 586	211
1920.....	1, 042	1, 160	3, 468	118
1921.....	1, 199	840	3, 827	359
1922.....	851	778	3, 900	73
1923.....	1, 027	819	4, 108	208
1924.....	809	710	4, 207	99
1925.....	820	732	4, 295	88
1926.....	819	794	4, 340	25
Total.....	11, 136	9, 892	-----	1, 244

<sup>1</sup> Loss.

The above table shows that there have been admitted to the hospital covering the period from July 1, 1916, to June 30, 1926, 11,136 patients. These patients come from all walks of life and represent most every vocation and profession. There are patients who were lawyers, doctors, business men, machinists, common and skilled laborers; teachers, nurses, musicians, artists, authors, and writers; officers and men committed from the United States Army and Navy and Marine Corps; retired officers and men of the United States Army and Marine Corps; veterans of the Civil, Spanish, and the World War; women who come from the various social strata, mothers, wives, and unmarried girls. There are also insane criminals and the criminally insane committed from Federal prisons and by the Supreme Court of the District of Columbia.

Many patients are physically as well as mentally ill and their ages vary from 10 to 90 years. Some are bedridden, others robust; some are untidy and have no insight as to either their mental or physical condition and have to be bathed, dressed, and looked after in the manner of infants, while others are excited and nervous, some violent and combative, frequently injuring themselves or those with whom they come in contact unless properly protected. There are some convalescent and improved, while there are others recovered as far as recovery is possible.

To furnish the "most humane curative treatment" for, as well as to house, feed, and in some instances, clothe and maintain satisfaction and contentment among these patients representing almost all creeds and colors and coming from different environments and suffering from many types of insanity, present the duties and responsibilities of the administration of the hospital. On June 30, 1926, 1,276 employees were engaged in taking care of these patients.

## III. CUSTODY OF PATIENTS

The following contains a summary of and comments upon the laws by virtue of which patients are sent to St. Elizabeths Hospital and received and held therein and an outline of the procedure employed for effecting commitments and releases. These matters are discussed under the following heads:

- (1) Summary of laws pertaining to commitments.
- (2) Deficiencies in commitment laws.
- (3) Procedure for commitment.
- (4) Release from commitment.

## (1) SUMMARY OF LAWS PERTAINING TO COMMITMENTS

Two general statutory methods are employed for effecting admission to St. Elizabeths Hospital, viz, (1) by judicial commitment; and (2) upon application or by direction of designated heads of executive and independent establishments. No statutory authority is found for the administrative heads of St. Elizabeths Hospital to initiate the movement for the admission of patients to said hospital, and it appears that the hospital authorities are very particular to refrain from such initiatory action.

(A) The following general classes of patients are admitted under judicial commitment:

1. Persons formally committed under order of the Supreme Court of the District of Columbia after hearing in lunacy proceedings and affirmative finding of unsound mind by jury.

2. Persons formally committed under order of the courts of the United States after having been charged with a criminal offense and a finding by a jury of the existence of insanity.

3. A third group considered here includes patients who have legally been adjudged insane in jurisdictions other than the District of Columbia, but who are committed, not through judicial commitment, but upon application or by direction of the head of an executive department.

The statutes effecting the admission of the judicially committed class of patients are as follows:

The proceedings instituted upon petition of the Commissioners of the District of Columbia to determine the mental condition of alleged indigent insane persons and persons alleged to be insane, with homicidal or otherwise dangerous tendencies, shall be according to the provisions of the Code of Law for the District of Columbia relating to lunacy proceedings. (Act Feb. 23, 1905, 33 Stat. 740.)

If any person, charged with crime, be found, in the court before which he is so charged, to be an insane person, such court shall certify the same to the Secretary of the Interior, who may order such person to be confined in the hospital for the insane. (Sec. 4851, Rev. Stats.)

Upon the application of the Governor of the Panama Canal the Secretary of the Interior is authorized to transfer to St. Elizabeths Hospital, in the District of Columbia, for treatment, all American citizens legally adjudged insane in the Canal Zone whose legal residence in one of the States and Territories or the District of Columbia it has been impossible to establish. (Act June 12, 1917, 40 Stat. 179.)

(B) The following general classes of patients are admitted upon application or by direction of designated heads of executive and independent establishments:

Insane persons belonging to the Army, Navy, Marine Corps, Coast Guard (formerly Revenue Cutter Service and Life Saving Service), civilian employees in the Quartermaster Corps of the Army, former members of the Army, Navy, Marine Corps, including beneficiaries of the Veterans' Bureau and inmates of soldiers' homes, insane prisoners of war and interned prisoners, insane convicts, insane patients of the Public Health Service, and (for periods not to exceed 30 days) alleged insane residents of and persons found within the District of Columbia.

Admission to the hospital of these classes of patients is not through judicial commitment, although in some cases that procedure is employed subsequently.

The statutes require the superintendent to receive into St. Elizabeths Hospital the following classes of persons, delivered to the institution upon the order or at the request of the following designated heads of executive and independent establishments:

(1) SECRETARY OF WAR

Insane persons belonging to the Army. (Sec. 4843, Rev. Stats.)

Civilian employees in the Quartermaster Corps of the Army who may be or may become insane while in such service. (Sec. 4843, Rev. Stats.)

Men who, while in the Army, have been admitted to the hospital and have been thereafter discharged from it on the supposition that they have recovered their reason, and have, within three years after such discharge, become again insane from causes existing at the time of such discharge, and have no adequate means of support. (Sec. 4843, Rev. Stats.)

Indigent insane persons who have been in the Army and been discharged therefrom on account of disability arising from such insanity. (Sec. 4843, Rev. Stats.)

Indigent insane persons who have become insane within three years after their discharge from the Army from causes which arose during and were produced by said service. (Sec. 4843, Rev. Stats.)

Interned persons and prisoners of war, under the jurisdiction of the War Department, who are or may become insane. (Act August 29, 1916, 39 Stat. 558.)

(2) SECRETARY OF THE NAVY

Insane persons belonging to the Navy and Marine Corps. (Sec. 4843, Rev. Stats.)

Men who, while in the Navy or Marine Corps, have been admitted to the hospital and have been thereafter discharged from it on the supposition that they have recovered their reason, and have, within three years after such discharge, become again insane from causes existing at the time of such discharge, and have no adequate means of support. (Sec. 4843, Rev. Stats.)

Indigent insane persons who have been in the Navy or Marine Corps and been discharged therefrom on account of disability arising from such insanity. (Sec. 4843, Rev. Stats.)

Indigent insane persons who have become insane within three years after their discharge from the Navy or Marine Corps from causes

which arose during and were produced by said service. (Sec. 4843, Rev. Stats.)

Interned persons and prisoners of war, under the jurisdiction of the Navy Department, who are or may become insane. (Act August 29, 1916, 39 Stat. 558.)

### (3) SECRETARY OF THE TREASURY

Insane persons belonging to the Coast Guard. (Sec. 4843, Rev. Stats.)

Men who, while in the Coast Guard, have been admitted to the hospital and have been thereafter discharged from it on the supposition that they have recovered their reason, and have within three years after such discharge, become again insane from causes existing at the time of such discharge, and have no adequate means of support. (Sec. 4843, Rev. Stats.)

Indigent insane persons who have been in the Coast Guard and been discharged therefrom on account of disability arising from such insanity. (Sec. 4843, Rev. Stats.)

Indigent insane persons who have become insane within three years after discharge from the Coast Guard from causes which arose during and were produced by said service. (Sec. 4843, Rev. Stats.)

Insane patients of the Public Health Service, viz, the following (in addition to members of the Coast Guard) who by statutory authority are entitled to hospital treatment from the Public Health Service. (Act March 3, 1875, 18 Stat. 486.)

Merchant seamen.

Officers and crew of the several vessels belonging to the Bureau of Fisheries.

Ex-service men hospitalized by virtue of the war-risk insurance act of March 3, 1919. (40 Stat. 1302.)

Commissioned officers of the Public Health Service and commissioned officers and enlisted men of the Coast and Geodetic Survey. (Act March 3, 1919, 40 Stat. 1302.)

Civilian employees of the Government entitled to treatment by reason of section 1 of the act of March 3, 1919 (40 Stat. 1302), which directs the Secretary of the Treasury to provide hospital and sanatorium facilities for sick and disabled discharged Army and Navy nurses (male and female); seamen on boats of the Mississippi River Commission, employees of the Public Health Service, certain keepers and assistant keepers of the Lighthouse Service, seamen of the Engineer Corps of the Army, civilian employees entitled to treatment under the United States employees' compensation act, and employees on Army transports not officers and men of the Army.

### (4) SECRETARY OF THE INTERIOR

All American citizens legally adjudged insane in the Canal Zone whose residence in one of the States and Territories or the District of Columbia it has been impossible to establish, upon application of the governor of the Panama Canal to the Secretary of the Interior. (Act June 12, 1917, 40 Stat. 179.)

All persons who, having been charged with offenses against the United States, are in the actual custody of its officers, and all persons



who have been or shall be convicted of any offense in a court of the United States and are imprisoned in any State prison or penitentiary of any State or Territory and who during the term of their imprisonment have or shall become and be insane, upon application of the Attorney General to the Secretary of the Interior. (Sec. 4852, Rev. Stats., as modified by the act of June 23, 1874, 18 Stat. 251, as amended by the act of August 7, 1882, 22 Stat. 330.)

(5) DIRECTOR, UNITED STATES VETERANS' BUREAU

While there appears no specific law conferring upon the Director of the United States Veterans' Bureau a right to commit patients to St. Elizabeths Hospital, section 9 of the act of August 9, 1921 (42 Stat. 149), does authorize the use of the institution for hospitalization of veterans. The section provides:

The director, subject to the general direction of the President, shall be responsible for the proper examination, medical care, treatment, hospitalization, dispensary, and convalescent care, necessary and reasonable after care, welfare of, nursing, vocational training, and such other services as may be necessary in the carrying out of the provisions of this act, and for that purpose is hereby authorized to utilize the now existing or future facilities of \* \* \* the Interior Department \* \* \* and such other governmental facilities as may be made available for the purposes set forth in this act; and such governmental agencies are hereby authorized and directed to furnish such facilities, including personnel, equipment, medical, surgical, and hospital services and supplies as the director may deem necessary and advisable in carrying out the provisions of this act, in addition to such governmental facilities as are hereby made available.

This provision is incorporated in section 10, act of June 7, 1924 (43 Stat. 610).

(6) PRESIDENT OF THE BOARD OF COMMISSIONERS OF THE SOLDIERS' HOME

Any inmate of the Soldiers' Home who may become insane, upon order of the President of the Board of Commissioners. (Act of July 7, 1884, 23 Stat. 213.)

(7) PRESIDENT OF THE BOARD OF MANAGERS OF THE NATIONAL HOME FOR DISABLED VOLUNTEER SOLDIERS

Any inmate of the National Home for Disabled Volunteer Soldiers who may become insane, upon order of the President of the Board of Managers. (Act of August 7, 1882, 22 Stat. 330, as amended by the act of February 20, 1905, 33 Stat. 731.)

(8) COMMISSIONERS OF THE DISTRICT OF COLUMBIA

The Commissioners of the District of Columbia are authorized to place in St. Elizabeths Hospital, and the superintendent of the hospital is authorized to receive, upon the written request of the commissioners, for a period of time not exceeding 30 days, indigent persons alleged to be insane or of unsound mind residents of or found within the District of Columbia, and alleged insane persons of homicidal or otherwise dangerous tendencies residents of or found within the District by the Metropolitan police of the District of



Columbia pending the formal commitment of such persons to the hospital, as provided by law, or their transfer to their homes when their places of residence are ascertained by the proper officials charged by law with that duty. (Act of April 27, 1904, 33 Stat. 317.)

The provision of law for apprehension by the Metropolitan police, above referred to, is as follows:

Any member of the Metropolitan police of the District of Columbia, or any other officer in said District authorized to make arrests, is authorized and empowered to apprehend, and detain without warrant, any insane person or person of unsound mind found on any street, avenue, alley, or other public highway or found in any public building or other public place within the District of Columbia \* \* \*. The major and superintendent of said Metropolitan police is authorized to order the apprehension and detention without warrant of any indigent person alleged to be insane or of unsound mind or any alleged insane person of homicidal or otherwise dangerous tendencies found elsewhere in the District of Columbia than in the places mentioned in the preceding paragraph whenever two or more responsible residents of the District of Columbia shall make and file affidavits with said major and superintendent of the Metropolitan police setting forth that they believe the person therein named to be insane or of unsound mind, the length of time they have known such person, that they believe such person to be incapable of managing his or her own affairs, and that such person is not fit to be at large or to go unrestrained, and if such person is permitted to remain at liberty in the District of Columbia the rights of persons and of property will be jeopardized or the preservation of public peace imperiled and the commission of crime rendered probable, and that such person is a fit subject for treatment on account of his or her mental condition: *Provided, however,* That before the major and superintendent of the said Metropolitan police shall order the apprehension and detention of any person upon the affidavits of the aforesaid residents or in case of arrests as provided in the preceding paragraph, he shall, in addition thereto, require the certificate of at least two physicians who shall certify that they have examined the person alleged to be insane or of unsound mind, and that such person should not be allowed to remain at liberty and go unrestrained, and that such person is a fit subject for treatment on account of his or her mental condition. (Act of April 27, 1904, 33 Stat. 317.)

(C) Private patients: Section 4853 of the Revised Statutes provided for admission to St. Elizabeths Hospital of private pay patients, as follows:

Whenever there are vacancies, private patients from the District of Columbia may be received at a rate of board to be determined by the Visitors, to be in no case less than the actual cost of their support.

Section 4854 of the Revised Statutes prescribed the procedure to be employed for securing the admission of such patients, viz, upon the certificate of two respectable physicians of the District of Columbia stating that they have personally examined the patient and believe him or her to be insane and a fit subject for treatment, accompanied by a written request for the admission from the nearest relative, legal guardian, or friend of the patient.

Section 1 of the act of January 31, 1899 (30 Stat. 811), changed the procedure for securing admissions of private pay patients to St. Elizabeths Hospital and in effect repealed so much of section 4854 of the Revised Statutes as related to the admission of such patients. Section 1 of the 1899 statute reads as follows:

That hereafter proceedings for admission to the Government Hospital for the Insane of \* \* \* pay patients admitted to the said hospital under section forty-eight hundred and fifty-four of the Revised Statutes of the United States \* \* \* shall be commenced by petition presented in open court to the justice of the Supreme Court of the District of Columbia holding a special term for orphans' court business \* \* \*.

The act of March 3, 1903 (32 Stat. 1043) provided:

That hereafter proceedings by the Commissioners of the District of Columbia to commit indigent insane persons and insane persons having violent or dangerous tendencies to the Government Hospital for the Insane shall be taken in the equity court of said District and shall be in conformity with the law in force in said District on the thirtieth day of January, eighteen hundred and ninety-nine.

That section 1 \* \* \* of the act of Congress approved January thirty-first, eighteen hundred and ninety-nine, \* \* \* and all other acts or parts of acts inconsistent herewith be, and the same are hereby, repealed.

With the repeal of the 1899 statute by the 1903 act, no provision of law remained as to the procedure to be employed for securing the admission to St. Elizabeths Hospital of private pay patients, except as such patients might fall within the class of "insane persons having violent or dangerous tendencies."

The act of April 27, 1904 (33 Stat. 316), is in substitution of all prior laws in the matter of procedure for apprehension, detention, and commitment of insane persons in the District of Columbia, section 7 thereof specifically providing "That all acts and parts of acts inconsistent with the provisions of this act be, and the same are hereby, repealed."

The act of 1904, in its application to nonindigents, includes only those of "homicidal or otherwise dangerous tendencies." The act, however, treats only of the procedure to be employed for a temporary commitment to St. Elizabeths Hospital (of not to exceed thirty days), pending "the formal commitment of such persons to the hospital as provided by law."

The act of February 23, 1905, 33 Stat. 740, provides—

that hereafter the proceedings instituted upon petition of the Commissioners of the District of Columbia to determine the mental condition of alleged indigent insane persons and persons alleged to be insane, with homicidal or otherwise dangerous tendencies, shall be according to the provisions of the code of law for the District of Columbia relating to lunacy proceedings. \* \* \*

Here again the law is made applicable only to those nonindigents of "homicidal or otherwise dangerous tendencies."

While section 4853 of the Revised Statutes, authorizing the receipt of pay patients still remains a law, its operation has nevertheless been greatly restricted by reason of the limitation in the present laws for the District of Columbia as to the type of person which may be committed to St. Elizabeths Hospital, and can apparently apply only to nonindigents with homicidal or otherwise dangerous tendencies. The act of February 23, 1905 (33 Stat. 740), directs the committee or trustee of a nonindigent insane patient to reimburse the District of Columbia out of the funds of said patient for the "costs incurred in caring for and treating such insane person."

## (2) DEFICIENCIES IN COMMITMENT LAWS

The Supreme Court of the District of Columbia has held within the past year in cases of civilians presented to it, that a commitment is insufficient to effect the retention of an insane person in St. Elizabeths Hospital unless the commitment is by order of the court, following the establishment of insanity by a legally constituted jury.

This holding establishes the weakness in those present laws which provide for commitment of civilians solely upon application or by the

direction of designated heads of executive and independent establishments of the Government. These acts simply direct the Superintendent of St. Elizabeths Hospital to receive and care for patients so sent to the institution upon such an order. No provision is made in the laws, except for commitments by the Commissioners of the District of Columbia, for any one of these committing authorities to initiate an action for the judicial commitment of a patient, and from the fact that the laws direct the superintendent to keep the patients until cured or removed by the committing authority, it would appear that Congress contemplated that an order from the head of an executive or independent establishment was all the action deemed necessary and would be final to accomplish a legal commitment. Furthermore, nowhere in the statutes is it made the duty of the Superintendent of St. Elizabeths Hospital to have the patients as they are received brought before the court for adjudication.

St. Elizabeths Hospital is in the District of Columbia and whenever a patient seeks to secure his or her release from the institution the action is brought in the Supreme Court of said District. The District of Columbia has very positive laws requiring a judicial ascertainment of insanity and a commitment by order of the court before a person can be committed to St. Elizabeths Hospital for an indefinite period. In actions brought the courts of the District inquire into the facts as to whether these requirements of law have been complied with, either directly or in effect, through judicial action in other jurisdictions which are recognized through comity between the States and the District of Columbia.

The laws for the District of Columbia in the matter of commitments to St. Elizabeths Hospital are by the terms thereof made applicable to residents of the District and the persons found within the District. Many of the patients in St. Elizabeths Hospital have been brought thereto from outside the District, but upon arrival are apparently considered as found within the District.

While no cases have recently been presented for inquiry of the courts of the District of Columbia as to the legal retention in St. Elizabeths Hospital of members of the active military and naval services of the United States through commitment orders issued by the executive heads of the respective services, it would appear that early decisions of the court have established the sufficiency of such commitments. In the case of William M. Bryant (3 Mackey, 489), Justice James, of the Supreme Court of the District of Columbia, announced:

This commitment has no resemblance to the case of persons in the Army or Navy or Marine Corps, or, perhaps, even in the Revenue Service. There the parties are already under control. A soldier can be made to go into the hospital for medical treatment upon the judgment of his superior officers, and they can order him to this asylum if they think that he ought to go there, and in that case the officers' action would be due process of law.

This decision is based no doubt upon the repeated holding of the courts (citing *United States v. Grimley*, 137 U. S. 147) that a person upon joining the military forces of the United States loses his status as a civilian and acquires that of a soldier, and as a soldier is subject to orders of his superior officers.

The recent practice, however, of issuing a discharge to an enlisted man of the military or naval service after his having been committed

by order of the executive head of the service concerned and admitted to St. Elizabeths Hospital, raises the question as to the legality of his retention after said discharge. The discharge restored his civil status and put him beyond the power of the committing authority to require him to remain at the institution. Cases of this nature have likewise recently been before the Supreme Court of the District of Columbia under proceedings seeking, after the issuance of the military discharge, a release from confinement in St. Elizabeths Hospital. In such cases the court has ruled in effect that the absence of adjudication as to mental condition and of commitment by order of the court overcomes the fact that the original commitment had the status of due process of law.

The advantage that has been taken of these inadequacies in the law to secure release from St. Elizabeths Hospital, irrespective of the mental condition of the patient, is specifically set out in this report under the heading "Writs of habeas corpus."

The terms of the act of April 27, 1904 (33 Stat. 316), in effect seem to preclude the commitment to St. Elizabeths Hospital of residents of the District of Columbia and of persons found therein, who, not being indigent, are nevertheless insane, but whose insanity does not take on a homicidal or other dangerous tendency. The act uses the terms "indigent persons alleged to be insane or of unsound mind or any alleged insane person of homicidal or otherwise dangerous tendencies."

In the recent lunacy case of William Gaffney, heard before the Supreme Court of the District of Columbia, the justice announced the following as the questions which the jury should answer in passing upon the status of the petitioner seeking release from St. Elizabeths Hospital:

1. Is the petitioner here, Mr. Gaffney, of sound or unsound mind? That question should be answered yes or no. If you answer that he is of sound mind, you need not answer the second question, for that will end the whole matter.
2. But if you answer the first question that he is of unsound mind, then the second question will be: Has he homicidal or other dangerous tendencies?

The court further remarked:

I do not leave to the jury the question whether or not the plaintiff is indigent because there is no question here to the effect that he is. No one says he is not financially well enough off to take care of himself so far as money is concerned. So that being an admitted fact, I do not put that third proposition before the jury.

While the specific terms of the law operate to exclude from legal commitment to St. Elizabeths Hospital a nonindigent whose insanity does not involve homicidal or other dangerous tendencies, it would appear from statements made by those in authority, and from the records of the institution, that adjudications in the past by the courts of the District of Columbia have not been limited to the specific classes covered by the law. The records show numerous adjudications and commitments by order of the court of patients diagnosed by the institutional staff as "without psychosis," for some of whom committees or guardians have been appointed by order of the court, evidencing that the patient is in the possession of property.

It would appear that complications are bound further to arise in such cases as insane retired officers of the military and naval services



and ex-service men. To these men the law specifically gives the right of admission to St. Elizabeths Hospital. Under the ruling of the court, in the matter of insufficiency of the commitment orders issued solely by the head of an executive or independent establishment, a retired officer, subject to orders of his superior officers in time of peace only with his consent, and an ex-service man, might not, unless his insanity ran to homicidal or other dangerous tendencies, meet the requirement of the law for a legal commitment to St. Elizabeths Hospital because through the receipt of retired pay or disability compensation he might not be an indigent.

The cases of beneficiaries of the Veterans' Bureau also present another phase of deficiencies in commitment laws.

When the hospitalization of veterans of the World War came under the Bureau of War Risk Insurance, and was furnished by the Public Health Service, both of which services were under the jurisdiction of the Treasury Department, the act of March 3, 1875 (18 Stat. 486), was authority for the Secretary of the Treasury to order the commitment of a veteran to St. Elizabeths Hospital for retention until cured or removed by his direction.

With the taking over of the hospitalization by the Veterans' Bureau, a different situation arose. Nowhere in the statutes has there been found any authority granting to the Director of the Veterans' Bureau the right or power to commit patients to St. Elizabeths Hospital such as was conferred upon the Secretary of the Treasury. Despite this absence of statutory authority the Director of the Veterans' Bureau used a commitment form letter of the same phraseology as had formerly been used by the Secretary of the Treasury, including the request that the patient be kept until cured or removed by his direction.

Section 9 of the act of August 9, 1921 (42 Stat. 149), hereinbefore quoted, simply authorizes the Director of the Veterans' Bureau to make use of St. Elizabeths Hospital in hospitalization work. The director has no more legal authority to compel a patient to remain in St. Elizabeths Hospital than he has to compel him to stay in any one of the hospitals directly belonging to the Veterans' Bureau service. Despite this fact, the situation nevertheless exists that the Superintendent of St. Elizabeths Hospital considers a patient received in the institution by request of the director as in the same status as a patient received upon request of the head of any one of the other executive or independent establishments of the Government to whom statutory authority to make such request is given.

Unless considered by the medical staff of St. Elizabeths Hospital to warrant discharge, no patient can secure his release upon his own application, and in the event that he escapes efforts are made to effect his apprehension and return. While in a few cases discharges of Veterans' Bureau patients have been secured through the insistent demand of the family, the only other avenue open by which a veteran can secure his release is through the employment of court proceedings. As this latter method necessitates the employment of legal counsel, the resultant effect is that patients who have funds are required to use them and patients who have no funds are helpless to seek the aid of the courts.

Section 6 of the act of June 7, 1924, 43 Stat. 619, appears to contemplate a legal adjudication and court commitment of insane



Veterans' Bureau patients. Except as the same may have been deemed necessary in order that a committee or guardian may be appointed, the director has issued numerous commitments to St. Elizabeths Hospital of nonadjudicated patients.

Section 6 of the act of June 7, 1924, referred to, provides:

In addition to the compensation above provided, the injured person shall be furnished by the United States Veterans' Bureau such reasonable governmental care \* \* \* and hospital services, including payment of court costs and other expenses incident to proceedings heretofore or hereafter taken for the commitment of mentally incompetent persons to institutions for the care or treatment of the insane \* \* \*.

### (3) PROCEDURE FOR COMMITMENT

#### (A) JUDICIAL COMMITMENT

The proceedings instituted upon petition of the Commissioners of the District of Columbia to determine the mental condition of alleged insane persons is by the terms of the act of February 23, 1905, 33 Stat. 740, to be according to the code of law for the District of Columbia relating thereto.

The act of February 23, 1905, specifically provides:

That the jury to be used in cases in which the commissioners are the petitioners shall be impaneled by the United States marshal for said district, upon order of the court, from the jurors in attendance upon the criminal courts of the District, who shall perform such services in addition to and as a part of their duty in said criminal courts.

Section 115 *a* of the District of Columbia Code, provides:

All writs de lunatico inquirendo shall issue from said equity court, and a justice holding said court shall preside at all inquisitions of lunacy, and may impanel a jury from among the petit jurors in attendance in the Supreme Court of the District of Columbia. (Act of April 19, 1920, 41 Stat. 556.)

Action in lunacy proceedings in the District of Columbia is initiated through a petition filed in the Supreme Court of the District of Columbia by the commissioners in form as follows:

In the Supreme Court of the District of Columbia—Holding an equity court  
In the matter of \_\_\_\_\_ alleged lunatic. No. \_\_\_\_\_ Lunacy.

#### PETITION FOR WRIT DE LUNATICO INQUIRENDU

*To the Supreme Court of the District of Columbia:*

Petitioners state as follows:

1. \_\_\_\_\_ the petitioners herein are the Commissioners of the District of Columbia, and as such are charged with the preservation of the public peace, the protection of the rights of persons and of property, and the prevention of crime in the District of Columbia.

2. Under the provisions of the act of Congress entitled "An act to authorize the apprehension and detention of insane persons in the District of Columbia," etc., approved April 27, 1904, one \_\_\_\_\_ who is believed to be insane or of unsound mind, has been apprehended, and is now detained at St. Elizabeths Hospital in this District pending formal inquisition into his mental condition.

3. The said \_\_\_\_\_ is represented to your petitioners, and is by them believed to be an indigent insane person or person of unsound mind, or if he be not an indigent insane person or person of unsound mind, he is an insane person with homicidal or otherwise dangerous tendencies, without sufficient capacity for the government of himself and of this property.

4. The said \_\_\_\_\_ has been insane or of unsound mind since, to wit, the \_\_\_\_\_ day of \_\_\_\_\_ 192\_\_\_\_, the cause of his insanity being

to petitioners unknown, but if certain representations made to them be true he is an unfit person to be at large, and is a fit subject for detention and treatment on account of his mental condition. Your petitioners further believe that if he be permitted to go at large within the said District the rights of persons and property therein will be jeopardized and the preservation of public peace imperiled, and the commission of crime rendered probable.

The premises considered, your petitioners pray:

1. That the writ de lunatico inquirendo may issue out of this honorable court in order that the alleged insanity of the said \_\_\_\_\_ may be inquired into and determined.

11. For such other and further relief as to the court may seem proper.

The petitioners aforesaid being first duly sworn depose and say that the matters and things set forth in the foregoing petition, which they hereby subscribe, are true to the best of their information, knowledge, and belief.

\_\_\_\_\_  
\_\_\_\_\_  
Commissioners of the District of Columbia.

\_\_\_\_\_  
\_\_\_\_\_  
Attorneys for Petitioners.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 192...

\_\_\_\_\_  
Notary Public, D. C.

Following the filing of the petition the court issues an order to show cause, in the following form:

In the Supreme Court of the District of Columbia—Holding an equity court  
In the matter of \_\_\_\_\_ alleged lunatic. No. \_\_\_\_\_. Lunacy.

#### ORDER

Upon consideration of the petition filed in the above-entitled cause by the Commissioners of the District of Columbia, it is, by the court, this \_\_\_\_\_ day of \_\_\_\_\_, 192...

Ordered, that the rule to show cause why the above-mentioned \_\_\_\_\_ should not be adjudged to be of unsound mind issue, returnable on the \_\_\_\_\_ day of \_\_\_\_\_, 192..., at \_\_\_\_\_ o'clock \_\_\_\_\_ m.

It is further ordered, that the United States marshal for the District of Columbia summon a jury of 12 good and lawful men of this District, according to the statute in such case made and provided, to appear in this court at the above-mentioned date and hour to inquire into the mental condition of the aforesaid person.

\_\_\_\_\_  
Justice.

Summonses are then issued and served upon the alleged insane person and upon witnesses commanding appearance in court on a designated date.

At the appointed time the case is brought to trial before a jury of 12 men, when testimony is taken bearing upon the mental condition of the alleged insane person. In the event his or her mental or physical condition is such that appearance in court is considered unwise, a statement to that effect by two accredited physicians is submitted, whereupon the case may proceed or the court may order a postponement.

In the event the jury finds that there exists a state of insanity of a type recognized by the act of February 23, 1905, as permitting commitment to St. Elizabeths Hospital, the finding is confirmed by the court and made of record, and by virtue thereof a commit-

ment order is issued by the Commissioners of the District of Columbia in form as follows:

EXECUTIVE OFFICE,  
COMMISSIONERS OF THE DISTRICT OF COLUMBIA,  
Washington, -----

To the SUPERINTENDENT OF ST. ELIZABETHS HOSPITAL,  
In the District of Columbia.

SIR: It appearing from the records of the Supreme Court of the District of Columbia, holding an equity court (lunacy cause No. -----), that a jury, lawfully impaneled and presided over by one of the justices of said court, according to law, has declared ----- to be of unsound mind and a fit subject for detention and treatment; and it further appearing that the verdict of said jury has been duly confirmed by said court, you are hereby requested and directed to admit the said ----- to the benefits and privileges of the Government Hospital for the Insane, in conformity with the statutes in such case made and provided.

Witness our hands and the seal of the District of Columbia the ----- day of -----, A. D. 19-----.

-----  
-----  
-----  
Commissioners of the District of Columbia.

In addition to the commitments ordered by the courts of the District of Columbia upon a legal finding of lunacy, there is a class of patients in St. Elizabeths Hospital who have been legally adjudged insane through court proceedings held in judicial districts outside the District of Columbia, but whose actual commitment to said hospital was upon application, or by direction, of heads of administrative and executive establishments. This latter class has been adjudicated in many instances for the purpose of having guardians appointed, which action has been recognized by the courts of the District of Columbia.

(B) COMMITMENTS UPON APPLICATION OR BY DIRECTION OF DESIGNATED HEADS OF EXECUTIVE AND INDEPENDENT ESTABLISHMENTS

Where admission of patients to St. Elizabeths Hospital is upon application or by direction of designated heads of executive and independent establishments other than the District of Columbia, no court procedure or judicial commitment is employed.

A medical survey, report, and recommendation is made to the head of the service concerned and based thereon a formal letter is addressed to the superintendent of St. Elizabeths Hospital or the Secretary of the Interior, as the law may specify, by the head of the establishment under whose jurisdiction the alleged insane person comes, requesting receipt of the patient into said hospital. The following is a sample of the form of these commitments, which, as employed by the various services, vary slightly in phraseology and detail:

TREASURY DEPARTMENT,  
Washington, -----

SUPERINTENDENT ST. ELIZABETHS HOSPITAL,  
Washington, D. C.

SIR: By direction of the Secretary, you are hereby requested to receive into St. Elizabeths Hospital, the person of -----, of the Lighthouse Service, an insane patient of the Public Health Service, transferred from United States Marine Hospital No. 14, New Orleans, La., to be cared for as prescribed by the acts of Congress approved March 3, 1875, and July 1, 1918.

Respectfully,

-----  
Assistant Secretary of the Treasury.

The medical record of the patient, upon which action was predicated, is forwarded to the hospital. In a great majority of these cases it appears that the patient has had no physical or mental examination to determine the state of his mind other than that of the doctors of the respective services.

The statutes require the superintendent to accept into St. Elizabeths Hospital for care and treatment, persons so committed until cured or removed by the same authority that instituted the commitment. The superintendent has construed these statutes as requiring him to receive the patient into the hospital, the question whether through action initiated by the hospital the patient would be retained, discharged, or returned to the committing authority as provided by law being determined after a thorough study of the medical record and an exhaustive examination of the patient at the time of his or her reception.

There appears nowhere in the statutes a specific or implied direction that members of the active service of the Army, Navy, Marine Corps, or Coast Guard shall while retaining that status be made the subject of judicial commitment. The Veterans' Bureau act of June 7, 1924, by reason of provisions therein carries an implication that such a procedure was in contemplation by Congress for ex-service patients.

The practice prevailed generally with the Army to discharge enlisted men by medical survey discharge after 30 days from date of commitment to St. Elizabeths Hospital. On the other hand, the practice prevailed generally with the Navy and Marine Corps not to issue discharges from the service upon commitment to St. Elizabeths Hospital unless the mental condition was superinduced by misconduct, but to treat the enlisted man in the same manner as though he were in a hospital for medical care, issuing the discharge from the service upon the happening of the expiration of enlistment.

Where it was found that enlisted men of the Navy and Marine Corps, committed by the Secretary of the Navy, would, as ex-service men, be entitled to the benefits of the war risk insurance act and the Veterans' Bureau act, the practice arose of having a discharge from the particular service issued in order that the patient might be taken over for hospitalization and other benefits of those acts.

After the discharge from the service had issued, a new commitment order to St. Elizabeths Hospital would issue from the Secretary of the Treasury. This procedure of having a patient so taken over has been termed a "transfer" to the Bureau of War Risk Insurance. A "transfer" and new commitment order was similarly employed in cases where after commitment from other sources it was learned that the patient had had military service. With the enactment of the Veterans' Bureau act this procedure was continued until May, 1926, when the Veterans' Bureau set up machinery for determining in each particular case whether a "transfer" should be or should have been made.

It appears that under the procedure in operation prior to May, 1926, the Bureau of War Risk Insurance and the Veterans' Bureau had made no inquiry into the cases "transferred" to it, as to whether the patient was entitled to hospitalization through those bureaus, simply perfunctorily preparing a new commitment order and assuming care of the patient, if it were believed he was an ex-service man.



From the survey made in May, 1926, by the representatives of the Veterans' Bureau it was learned that some of these "transferred" patients were not legally entitled to hospitalization by the bureau. A number of such cases were found to have been ex-service men of other than the World War, for whom no provision for hospitalization was made until enactment of the act of June 7, 1924 (sec. 202-10), while a few were found not to have had military service as alleged.

This "transfer" procedure has resulted in the large number of patients in the hospital termed "Veterans' Bureau patients."

It has been learned from the representatives of the Veterans' Bureau that the "transfer" procedure has not been followed in all cases with the result that there are under treatment in the same hospital members and ex-members of the military services who are held under the original commitments of the Secretaries of War, Navy, and Treasury.

In addition to this transferred class there are in the hospital patients originally committed by the Director of the United States Veterans' Bureau. In connection with this class it is stated by officials of the United States Veterans' Bureau that no ex-service man has been committed to St. Elizabeths Hospital without his consent.

The form of commitment used by the Director of the Veterans' Bureau, elsewhere exhibited, announces that the patient is insane and requests the superintendent of St. Elizabeths Hospital to care for the person "as prescribed by the acts of Congress approved March 3, 1875, and March 3, 1919."

The act of March 3, 1875, dealt with the hospitalization of insane patients of the Marine Hospital Service (now Public Health Service) by providing for admission to the hospital to be "cared for therein until cured or until removed by the same authority." The act of March 3, 1919, authorized hospitalization by the Secretary of the Treasury of veterans of the World War.

The Commissioners of the District of Columbia are limited in their right to make commitments to St. Elizabeths Hospital to persons residing or found within said District and for a period of 30 days. The formality of bringing such cases before the commissioners may be through arrest by the Metropolitan police and confinement in Gallinger Hospital or through affidavits of two or more responsible residents.

The request for the 30-day commitment must in all cases be accompanied by the certificate of at least two legally qualified physicians alleging their belief that the person is insane. The act of April 27, 1904, 33 Stat. 318, precludes the acceptance of certificates from certain physicians, as follows:

For the purposes of this act no certificate as to the sanity or insanity of any person shall be valid which has been issued (a) by a physician who has not been regularly licensed to practice medicine in the District of Columbia, unless he be a commissioned surgeon of the United States Army, Navy, or (Public Health Service); or (b) by a physician who is not a permanent resident of the District of Columbia; or (c) by a physician who has not been actively engaged in the practice of his profession for at least three years; or (d) by a physician who is related by blood or by marriage to the person whose mental condition is in question. Nor shall any certificate alleging the insanity of any person be valid which has been issued by a physician who is financially interested in the hospital or asylum in which the alleged insane person is to be confined, or who is professionally or officially connected therewith.

The following is the form used by the Commissioners of the District of Columbia in directing commitments to the hospital:

COMMISSIONERS OF THE DISTRICT OF COLUMBIA,  
EXECUTIVE DEPARTMENT,  
Washington, -----

To the SUPERINTENDENT OF THE  
GOVERNMENT HOSPITAL FOR THE INSANE,  
District of Columbia.

SIR: The Commissioners of the District of Columbia request the admission of ----- to the Government Hospital for the Insane under the provisions of the act of Congress approved April 27, 1904 (33 Stat. 316), pending a formal investigation of ----- mental condition according to law. The said -----, colored, 39 years old, residence District of Columbia, address -----, has been examined under provisions of said act and declared by Doctors ----- and ----- to be insane and a fit subject for treatment. The affidavits required by law were made by ----- and -----, both of Gallinger Hospital.

In consideration of ----- admission to and remaining in said institution the commissioners agree to comply with the regulations of the hospital in regard to payment of board, and in all other respects.

-----  
-----  
-----  
Commissioners of the District of Columbia.

Sanitary Officer, M. P.

Patients are quite often retained in St. Elizabeths Hospital beyond the 30 days for which they were committed by request of the Commissioners of the District of Columbia before legal commitment or discharge occurs. These cases have arisen where the commissioners have petitioned within the 30 days for the writ de lunatico inquirendo, but through postponements of the court hearings the cases have not been disposed of within 30 days. The legality of so retaining a patient in St. Elizabeths Hospital after the lapse of 30 days was a matter which the superintendent had for some time sought an opinion of the courts, but had only succeeded in securing opinions of the legal officials of the Interior Department and the Department of Justice. A case of this nature finally came before the Supreme Court of the District of Columbia upon a petition for a writ of habeas corpus in the case of one William F. Shoeman, and was decided October 6, 1926, by the court in a memorandum decision, as follows:

The Commissioners of the District acted promptly after the petitioner had been taken into custody, instituting the lunacy proceedings 30 days thereafter. There is no law requiring that in such a case adjudication must take place within the 30 days mentioned in the statute quoted or that the superintendent must discharge the patient temporarily committed, if such adjudication does not take place within said period, provided that the lunacy inquiry is only instituted in the court within said period.

#### (4) RELEASE FROM COMMITMENT (INCLUDES HABEAS CORPUS PROCEEDINGS)

Releases from commitment to St. Elizabeths Hospital arise through discharge, death, elopement, and transfer to other institutions.

Of the 13,495 patients either in the hospital on July 1, 1916, or committed during the period from July 1, 1916, to June 30, 1926, 9,155 have been released as follows:

Discharged as—		
Recovered	1,355	
Without psychosis	953	
Improved	1,206	
Unimproved	753	
Total		4,267
Transferred—		
To other hospitals	874	
To proper State jurisdiction	365	
Total		1,239
Deported	110	
Eloped	381	
Deceased	3,158	
Grand total		9,155

## (A) DISCHARGE OF PATIENTS

The general statutes governing the commitment of patients to St. Elizabeths Hospital by the Secretaries of War, Navy, Interior, and the Treasury Department, the governors and boards of managers of soldiers' homes, and Commissioners of the District of Columbia on orders of the court provide that such patients shall be cared for by the hospital until cured or removed by the committing authorities. Under these laws it would seem that the hospital is charged with the duty of detaining until cured or removed, any patient committed by these authorities. The discharge of patients from the Veterans' Bureau, however, would seem to be governed by other considerations, as the director of the bureau is authorized merely to hospitalize them.

The hospital discharges as "recovered" patients who have overcome their mental upset and returned to a sound mind as determined by the medical conference, no patient being so discharged except with the approval thereof.

The act of February 23, 1905 (33 Stat. 740), provides:

In case any person adjudged to be of unsound mind in the District of Columbia who is committed to the (Saint Elizabeths Hospital) \* \* \* recovers his or her reason and is discharged from such hospital as cured, the superintendent of said (Saint Elizabeths Hospital) \* \* \* shall immediately thereafter file with the clerk of the Supreme Court of the District of Columbia his sworn statement that such person, in his opinion, was at the time of his discharge of sound mind, and such statement shall be sufficient to authorize the court to pass an order declaring such person to be restored to his or her former legal status as a person of sound mind.

It appears to be the practice of the hospital to furnish the certificates required by the above law and in the very few cases that have been overlooked the clerk of the court has requested them.

It frequently occurs that persons of pronounced eccentricities, suffering from hysteria or having psychopathic personalities are committed to St. Elizabeths Hospital by the various committing authorities. It is the practice of the hospital through its Medical Conference to discharge such patients as being "without psychosis" as soon as such determination is reached.

While it may be questioned whether the superintendent of St. Elizabeths Hospital has the right under the general statutes to release any patient until cured, it has been the practice, upon the request

of friends or relatives, to discharge as "improved" or "unimproved" patients whose form of insanity indicated no homicidal or suicidal tendencies, when as the result of an investigation by the Social Service department of the hospital it is found that the patients could be amply provided for and that the home surroundings and environment were such as would not tend to aggravate their disturbed conditions, but would operate rather to assist their social adjustment.

It is generally the practice to precede such discharges with tests of the patient's ability to make suitable adjustment by first permitting extended periods of furlough from the hospital. It has been noted further that releases infrequently are made when the records indicate the condition of the patient to be merely "improved" or "unimproved" upon the unqualified demands of relatives. These demands generally emanate from relatives and friends of patients who have been hospitalized by the Director of the Veterans' Bureau and who have not been legally adjudged of unsound mind.

Other releases of patients whose conditions have been recorded as "improved" or "unimproved" occur pursuant to orders of the court. Such orders are predicated upon lunacy hearings or writs of habeas corpus.

From the following table it will be noted that of the 1,959 patients released as "improved" or "unimproved," 1,724 were discharged by the hospital and 235 were ordered to be discharged by the District Supreme Court during the period July 1, 1916, to June 30, 1926:

Committed by—	Improved		Unimproved	
	By hospital	By order of court	By hospital	By order of court
Secretary of War.....	275	3	39	1
Secretary of Navy.....	69	3	29	2
Secretary of Treasury.....	34	1	5	
Commissioners of the District of Columbia.....	263	77	352	139
Governor Soldiers' Home, District of Columbia.....	8		3	1
Boards of Managers National Home for Disabled Volunteer Soldiers.....	3		2	
Secretary of Interior, Canal Zone.....	1			
Prisoners.....	50	3	11	2
Director U. S. Veterans' Bureau.....	410	6	170	6
Total.....	1,113	93	611	142

A questionnaire distributed among the medical officers of the hospital elicited the information that certain of the patients might be removed or transferred to other institutions. Some that have been diagnosed as idiots, imbeciles, and morons, including 16 mentally defective children, might be transferred to institutions for feeble-minded; some epileptics without psychosis might also be transferred to an institution more appropriately prepared for treating that disease; some might be transferred to soldiers' homes, and others might be discharged if they could have proper and approved supervision. The following table indicates the extent of such potential removals:



Doctor	For transfer to institutions for the feeble-minded	For transfer to soldiers' homes	For discharge to custody of friends or relatives	For removal, but place or kind of institution not shown
John E. Lind	(1) 5	(1) 1	(1) (1)	(1) (1)
Elmer Klein	50			
Mary O'Malley	12	2	12 or 15	
D. C. Main	1			
N. D. C. Lewis				2
K. H. Houch		12		
S. A. Silk	8	45	(1)	(1)
J. P. H. Murphy				
John H. Cassidy				
Total	76	60	15	2

Grand total, 153.

Some difficult to state exact number without reviewing each case.

Releases by order of the court arise when upon lunacy hearing the patient is found not to be insane, when upon proceeding under habeas corpus the finding is either that the patient is not insane or has not legally been committed, and when guaranty bond is given by a person seeking the release of a patient.

For discharges of the class last referred to, section 4856 of the Revised Statutes provides:

If any person will give bond with sufficient security, to be approved by the Supreme Court of the District of Columbia, or by any judge thereof in vacation, payable to the United States, with condition to restrain and take care of any independent or indigent insane person not charged with a breach of the peace, whether in the hospital or not, until the insane person is restored to sanity, such court or judge thereof may deliver such insane person to the party giving such bond.

The records of the hospital have not been classified as to the nature of the legal action taken in the cases released pursuant to orders of the court, but it may be safely assumed that the greater proportion of those patients committed by the Commissioners of the District of Columbia were discharged after lunacy hearings instituted within 30 days after commitment and that the remainder, including commitments by all other authorities, were the result of hearings under writs of habeas corpus.

(a) *Habeas corpus proceedings*.—During the period of 10 years covered by this investigation the number of releases and discharges through court procedure on writs of habeas corpus were comparatively small. Most of these writs were instituted by patients committed by heads of Government departments and the Director of the Veterans' Bureau. From January 1, 1926, to October 29, 1926, there have been 68 writs of habeas corpus issued.

The following list shows for each writ issued name of patient, status, whether or not adjudicated, name of attorney representing patient, and action of the court:

Name	Status	Adjudication	Attorney	Action taken
Davis, Keith	U. S. Veterans' Bureau	Yes	Cusick	Declared of sound mind by jury Jan. 25.
Williams, Ernest B.	Prisoner	No	Self	Found of unsound mind by jury Apr. 30.
Washington, Elbert C.	District of Columbia	Yes	Wm. I. Miller	Found of sound mind by jury Apr. 23.
Tisdale, George	Prisoner	No	Symington & Savage	Found of sound mind by jury June 29.

Name	Status	Adjudication	Attorney	Action taken
Grant, John L.	U. S. Veterans' Bureau.	No	Mackey	Discharged by court May 7 without lunacy inquiry.
Moore, William	do.	Yes	Cusick	Unopposed by superintendent and district attorney; discharged May 14.
Wood, James A.	Prisoner	Yes	Joyce & Savage	Found of sound mind by jury May 24.
Valentine, J. B.	U. S. Veterans' Bureau.	No	Curtis	Found of sound mind by jury May 23.
Millett, Richard	do.	No	Jonas M. Smith	Found of sound mind by jury May 21.
Collier, John	Prisoner	No	J. P. Farmer	Discharged by court without lunacy hearing May 28.
Bergman, Herman	U. S. Veterans' Bureau.	Yes	Curtis	Petition withdrawn by patient June 8.
Houghton, Wm. P.	do.	Yes	do.	Found of sound mind by jury July 8.
Jones, John B.	do.	No	do.	Discharged by court without lunacy hearing June 9.
Wolverton, Wm. H.	do.	Yes	do.	Found of sound mind by jury June 28.
Dean, Doss (Dorsey)	do.	Yes	do.	Petition withdrawn by attorney June 2.
Ferraro, Frank	District of Columbia	No	Munter	Discharged by court June 21 without lunacy hearing.
DeBrodes, George	Prisoner	Yes	do.	Found of sound mind by jury June 25.
Meigan, William	Soldiers' Home	No	Curtis	Scheduled for hearing June 25, but was continued until an unnamed date.
Smith, Frank L.	Army	No	do.	Hearing set for July 7, but continued until an unnamed date.
West, William	Public Health Service	No	do.	Declared of sound mind by jury June 25.
Allen, Frank D.	U. S. Navy	Yes	do.	Found of sound mind by jury June 25.
Powers, Michael	Army	No	do.	Hearing set for June 25, but continued until an unnamed date.
Brown, Robert W.	District of Columbia	Yes	do.	Declared of sound mind by jury Aug. 16.
White, Geo. R.	U. S. Veterans' Bureau.	No	do.	Petition withdrawn by attorney June 25.
Johnson, Noel C.	do.	No	do.	Discharged by court Aug. 5 without lunacy hearing.
Martin, James E.	Soldiers' Home	No	do.	Found of sound mind by jury June 25.
Gaffney, Wm. F.	U. S. Veterans' Bureau.	Yes	do.	Hearing first set for June 25 then continued till Aug. 12 at which time jury disagreed on patient's soundness of mind. Second hearing was held Oct. 20, at which time the court dismissed petition and remanded patient to the hospital without hearing on mental condition, on the ground that his adjudication in Alabama was valid.
Morris, Jos. P.	do.	No	do.	Discharged by court July 2 without lunacy hearing.
Oringer, C. C.	Soldiers' Home	No	do.	Discharged by court July 14 without lunacy hearing.
Treibly, Chas. E.	U. S. Navy, retired	No	do.	Discharged by court July 7 without lunacy hearing.
Boninger, Esayas C.	Army	No	do.	Discharged by court Aug. 5 without lunacy hearing.
Collins, John B.	U. S. Marine Corps, retired.	No	do.	Discharged by court July 14 without lunacy hearing.
Schufeldt, Robt. W.	U. S. Army, retired	No	do.	Discharged by court July 14 without lunacy hearing. (See habeas corpus No. 1341.)
McCallig, E. J.	Public Health Service	No	do.	Discharged by court July 14 without lunacy hearing. Immediately arrested. (See habeas corpus No. 1334.)
Callahan, George	U. S. Veterans' Bureau.	No	Savage	Discharged by court July 8 without lunacy hearing.

Name	Status	Adjudication	Attorney	Action taken
Boelscher, Bernard.....	U.S. Veterans' Bureau	No.....	Curtis.....	Discharged by court July 7 without lunacy hearing.
Griffith, Anna M.....	District of Columbia prisoner.	Yes.....	do.....	Found of unsound mind by jury July 19. (See habeas corpus No. 1358.)
Mason, Everett L.....	U. S. Veterans' Bureau.	No.....	do.....	Discharged by court July 16 without lunacy hearing.
Kaschube, Gus R.....	U. S. Navy.....	No.....	do.....	Discharged by court July 19 without lunacy hearing.
Major, Samuel R.....	Military prisoner.....	No.....	do.....	Do.
Hoffman, John.....	U. S. Army.....	No.....	do.....	Discharged by court July 20 without lunacy hearing.
Sullivan, Albert.....	U. S. Veterans' Bureau.	No.....	Savage.....	Discharged by court Aug. 9 without lunacy hearing. Immediately arrested. Was subsequently found of unsound mind by jury.
Howell, Chas. N.....	District of Columbia..	Yes.....	Munter.....	Found of sound mind by jury July 22.
Joyce, Lawrence E.....	U. S. Veterans' Bureau.	No.....	Curtis.....	Petition withdrawn by attorney Aug. 4 and ordered returned to hospital by court.
Schram, Thomas J.....	do.....	No.....	do.....	Discharged by court Aug. 4 without lunacy hearing. Immediately arrested. Was subsequently found of unsound mind by jury.
Poling, Carl A.....	do.....	Yes.....	do.....	Petition withdrawn in court Aug. 4 by patient.
Edwards, Weyman G..	U. S. Navy.....	No.....	do.....	Discharged by court Aug. 5 without lunacy hearing. Immediately arrested. Was subsequently found of unsound mind by jury.
Crowe, Patrick J.....	U. S. Army.....	No.....	Savage.....	Discharged by court Aug. 9 without lunacy hearing. Immediately arrested. (See habeas corpus No. 1346.)
Murdock, Joseph.....	U.S. Veterans' Bureau.	No.....	Curtis.....	Discharged by court July 23 without lunacy hearing.
McCallig, E. J.....	District of Columbia, temporary care.	No.....	do.....	Petition dismissed by court July 26. Patient remanded to hospital and scheduled to appear before District lunacy hearing Sept. 10. (See habeas corpus No. 1314.)
Harris, John A.....	U.S. Veterans' Bureau.	No.....	do.....	Discharged by court July 26 without lunacy hearing. Immediately arrested. (See habeas corpus No. 1342.)
Condry, Roy R.....	U. S. Army.....	No.....	do.....	Case continued on Aug. 2 to unnamed date.
Martin, Sidney.....	U.S. Veterans' Bureau.	No.....	do.....	Discharged by court Aug. 9 without lunacy hearing.
Kemp, Eldred R.....	District of Columbia, prisoner.	Yes.....	do.....	Appeared in court Aug. 10, at which time jury disagreed as to soundness of mind. Patient returned to hospital.
Schufeldt, Robt. W.....	District of Columbia, temporary care.	No.....	do.....	Patient ordered discharged after agreement with hospital. (See habeas corpus No. 1313.)
Harris, John A.....	do.....	No.....	do.....	Case set for District lunacy hearing Sept. 10. Petition withdrawn Oct. 20 by Curtis. (See habeas corpus No. 1335.)
Kolls, Alfred C.....	U. S. Veterans' Bureau	No.....	do.....	Patient discharged by court Aug. 19 without lunacy hearing. Immediately arrested. (See habeas corpus No. 1356.)

Name	Status	Adjudication	Attorney	Action taken
Crowe, Patrick J.	District of Columbia, temporary care.	No.	Savage	The judge announced he was going to discharge patient, whereupon patient left the city; the judge subsequently changed his mind and refused to sign the order discharging the patient. (See habeas corpus No. 1331.)
Berry, Roy	U. S. Veterans' Bureau	Yes	Curtis	Declared of unsound mind by jury Oct. 20.
Hart, Cyrus	National Home for Disabled Volunteer Soldiers.	No	do	Discharged by court Sept. 8 without lunacy hearing.
Evans, Harry S.	U. S. Veterans' Bureau	In Va.	do	Continued from time to time, as patient was absent from hospital.
Kolls, Alfred C.	District of Columbia, temporary.	No	do	Returnable Sept. 17. Dismissed Oct. 5 after request for postponement and statement by Curtis that patient was not well enough to leave hospital. Patient adjudged of unsound mind, lunacy hearing Oct. 8. (See habeas corpus No. 1343.)
Gaskell, John W.	U. S. Veterans' Bureau	Yes	do	Returnable Sept. 17. Declared of sound mind by jury Oct. 19.
Griffiths, Anna M.	District of Columbia, prisoner.	Yes	do	Returnable Sept. 17. Declared of sound mind by jury Oct. 13. (See habeas corpus No. 1318.)
Freeman, Lawrence	Soldiers' Home	No	Crandall Mackey.	Discharged by court without lunacy hearing Sept. 10.
Reis, Charles	District of Columbia	Yes	Curtis	Returnable Sept. 29.
Hays, Herbert M.	Navy	Yes (Ark.)	do	Returnable Sept. 29. Patient discharged before writ was served. Was subsequently readmitted, of which fact the court was notified. The patient then appeared in court and requested that the petition be withdrawn.
Shoemaker, William	District of Columbia	Yes (D. C.)	do	Returnable Oct. 6. Oct. 6 adjudication declared legal. No hearing on mental state.
Shoemaker, William	do	Yes (D. C.)	do	Returnable Oct. 27. Declared of sound mind by jury Oct. 27.
Gaffney, William F.	U. S. Veterans' Bureau	Yes	do	Declared of sound mind by jury Oct. 28.
Maya, Antonio O.	United States prisoner.	No	do	Returnable Nov. 10.

Analysis of the above list shows that of the total 70 writs of habeas corpus 29 were instituted for Veterans' Bureau patients, 8 by prisoners whose term of imprisonment had expired, 11 by patients from the District of Columbia, 5 by patients committed from soldiers' homes, 10 by patients committed from the United States Navy and Marine Corps, and 7 committed from the United States Army. The list also discloses that 21 patients were discharged without a lunacy hearing, 8 were discharged without a lunacy hearing, and immediately arrested and subsequently found of unsound mind by jury, 17 were found of sound mind by jury, 4 found of unsound mind on first hearings, 9 petitions were withdrawn by attorney for patient, and 6 cases pending in court. It is also observed that George F. Curtis, attorney, represented patients in 53 cases.

It appears from statements obtained from patients who had cases pending and were later discharged by the court that attorney's fees,



provided a release from the hospital was obtained, ranged from \$200 to \$500, depending on the amount of money the patient had to his credit with the hospital or in the hands of his legal representative. Some of these patients stated that Attorney Curtis had approached them and solicited them as clients. One case was reported where it took all the patient's ready money, amounting to \$267, to pay the attorney for securing his discharge, after which he was left stranded in the city. This patient, whose name is Joseph A. Murdock, was committed to the hospital by order of the Secretary of the Navy, June 8, 1920, and was later transferred to a Veterans' Bureau status. The patient was released from the hospital on a writ of habeas corpus proceeding instituted by George F. Curtis. For his services Curtis is alleged to have charged about \$267, which represented practically all that the patient had except money due from the Veterans' Bureau.

Murdock, being then without funds, went to the home of Mrs. E. C. Wagner, who, in her capacity of war mother, had befriended him on numerous occasions. Mrs. Wagner was not at home, but her sister, knowing of Mrs. Wagner's interest in the patient, took him in. After allowing him to remain there for a week then she told him she could keep him no longer and suggested that he make other arrangements. Mrs. Wagner, returning at this time, made it possible for Murdock to return to New York by providing railroad fare and a taxi to the station.

Writs of habeas corpus are issued upon petitions filed in the Supreme Court of the District of Columbia by the patient or his legal representative. The petition prays that the person of the patient is not being legally held for one of two reasons: First, that the patient is not insane or, secondly, because the patient was not legally committed, that is to say, his insanity was not inquired into by court procedure and a jury of 12 men. Cases coming under the first class have been adjudicated, while the second class were committed by order of the heads of one of the Government departments or the Director of the Veterans' Bureau.

When a patient is brought into court on a writ of habeas corpus sued out on a petition alleging that he is not insane, the court orders a lunacy hearing for the purpose of inquiring into his mental condition. Such hearings are before a jury of 12 men. If the patient is found of sound mind he is discharged, otherwise he is returned to the hospital for further care and treatment.

When a patient is brought in on a writ alleging that he is illegally held because of not having been legally committed, the court inquires only into this phase, and will order the release of the patient who has not been adjudged of unsound mind by a court of competent jurisdiction.

When patients who are alleged by the Superintendent of St. Elizabeths Hospital to be of unsound mind and of homicidal or other dangerous tendencies are released from the hospital by order of court on the ground that they have not been adjudged insane at the time of such discharge, a procedure is employed of having them placed under arrest by the Metropolitan police and taken to Gallinger Hospital and later returned to St. Elizabeths Hospital upon an order from the Commissioners of the District of Columbia.

The different phases of writs corpus are set out in the case of Joseph Patrick Crowe, a retired Army sergeant, who was committed to St. Elizabeths Hospital on November 20, 1924, from Walter Reed Hospital by an order from the Secretary of War with the diagnosis of paranoid condition. On August 9, 1924, Crowe appeared before the Supreme Court of the District of Columbia on a writ of habeas corpus obtained by John A. Savage, his friend, on the ground that the patient was illegally held. The court ordered the patient's discharge from the hospital, the court holding that the patient might no longer be held against his wishes without a formal adjudication through a court procedure. There was no inquiry as to the mental condition of the patient. Immediately following his discharge the patient was arrested by the District police, who acted upon a letter submitted to the Commissioners of the District of Columbia by the Superintendent of St. Elizabeths Hospital to the effect that Crowe was of unsound mind with homicidal tendencies. Following his arrest he was sent to Gallinger Hospital and on August 17, 1926, was recommitted to St. Elizabeths Hospital by order of the District Commissioners.

It appears that on August 2, 1926, Crowe gave John A. Savage a power of attorney. August 11, 1926, Savage called at the hospital, produced certified copy of the power of attorney and an order from Crowe directing the hospital to deliver to Savage \$1,254.18, being the balance to the credit of the said Crowe. Payment was made to Savage in the form of a check in favor of Crowe.

September 3, 1926, Crowe was in court for hearing in connection with application for a writ of habeas corpus in his behalf by Savage. One of the allegations of the writ was that Crowe was being held incommunicado at the hospital. It developed that Mrs. Myrtle de Montis, treasurer of the American Equity Association, of which Savage is president, the objects of which association are stated to be "to secure to all persons the rights, privileges, and immunities which are theirs under the Constitution and laws of the United States, and to which they are justly entitled as members of the human family," had \$1,254.18 of Crowe's money on deposit at the Continental Trust Co. (no doubt the money of Crowe delivered to Savage as above outlined).

At this hearing Dr. William A. White testified that in his belief Crowe was of unsound mind. The court then appointed one Joe Morgan, an attorney, as guardian ad litem for Crowe, and continued the case until September 10, 1926. In the meantime a writ de lunatico was served on Crowe, returnable September 10. On September 10 the habeas corpus case came up first and Crowe was allowed to depart upon what appears to have been understood as an oral order of Justice Hitz for his discharge. A little later in the day the assistant United States district attorney protested against the release of Crowe, and formal order of release not having been signed, Justice Hitz directed the return of Crowe to court, but Crowe had left and could not be found.

On August 24 Mr. Crowe stated he had full confidence in Mr. Savage, to whom he had promised a fee of \$300 for procuring his release.

Under the present procedure it becomes, as illustrated by the above case, necessary for a patient to secure an attorney at a cost of

from \$200 to \$500 in addition to court costs to obtain a court hearing. For this reason the chances for obtaining a hearing in court of those patients who are financially unable to pay an attorney are lessened, although they may be as sound mentally as the more fortunate ones who have the means for paying the required court costs, including attorney's fee.

(b) *Death of patients.*—Of the 3,158 deaths during the past 10 years, 3,150 resulted from natural causes, 20 from homicides, and 30 from suicides.

Upon the death of a patient the body is taken to the hospital morgue, and the death certificate is made by a registered physician of the District of Columbia, who is also as a rule a medical officer of the hospital, or in cases requiring the District of Columbia coroner, the certificate is made by him.

An effort is made to notify friends or relatives of the deceased and their wishes in regard to the disposition of the remains is requested as well as permission to perform an autopsy. In cases where the deceased has no known friends or relatives and also when permission is obtained therefor, autopsies are generally performed in the autopsy room of the hospital. During the past year autopsies were made in 67 per cent of the deaths occurring at the hospital. The findings of the autopsies are preserved by photography, specimens, and records.

In the case of a deceased indigent person the body is given to the Anatomical Board of the District of Columbia for disposition. However, the hospital makes an effort to retain a small sum of money in the patient's account at the hospital in order to provide burial in a pine box and marked grave in a cemetery on the hospital grounds.

Other burials of deceased patients are provided for by friends, relatives or organizations, the former service man being provided with a metallic coffin.

(c) *Elopement of patients.*—Elopement is the term applied to the act of leaving the hospital by escape or through failure to return from a grant of city parole or out-of-city leave. Despite the precautionary measures employed by the hospital, 381 patients eloped during the past ten years.

Aside from notice given the police department of the District of Columbia, no procedure is employed to give general notice of the escape of a patient. Furthermore, the hospital authorities contend that they are without authority to compel the return of an escaped patient except as he or she may have been apprehended in the District of Columbia.

The hospital has no fixed rule that after the lapse of a certain period a patient on elopement shall be marked off of the register. No eloper's name is marked off until his case has been presented to and passed upon by the conference board. Based upon the latest reports of the patient, a formal entry of discharge "improved" or "unimproved" is made of record in each such case, the discharge date being that of the approval of the conference board's recommendation and not the date of elopement.

Sometimes the whereabouts of an eloper is learned by the hospital authorities and based upon reports as to his or her condition, an entry of discharged as "improved" or "unimproved" will be placed upon the record. This action is always taken when it is learned that an eloper has been admitted to another institution.

It is an established rule of the hospital that after an eloper has been marked off, a new commitment must be presented before he or she will again be accepted for admission.

The hospital has an appropriation for actual and necessary expenses incurred in the apprehension and return to the hospital of escaped patients. The practice has been of long standing to pay a lump sum of \$5 for the return of an escaped patient found in the District of Columbia and to pay actual expenses incurred in the return of escaped patients found elsewhere. No payments of this nature are, however, made to members of the Metropolitan police of the District of Columbia or to any person receiving remuneration from the United States.

(d) *Transfer of patients.*—Releases by transfer occur when by reason of statutory provisions, or the action of the committing authority, it is desired to send the patient elsewhere for treatment.

For American citizens committed to the hospital from the Canal Zone, the act of June 12, 1917 (40 Stat. 179), provides:

Upon the ascertainment of the legal residence of persons so transferred to the hospital, the superintendent of the hospital shall thereupon transfer such persons to their respective places of residence \* \* \*

Likewise for persons committed from the District of Columbia, the act of January 31, 1899 (30 Stat. 811), provides:

It shall be the duty of the Commissioners of the District of Columbia, so soon as practicable, to return to their places of residence or to their friends, all indigent insane persons not residing in the District at the time they became insane who are now detained in the (St. Elizabeths Hospital), or who shall be committed to the said hospital to be temporarily cared for \* \* \*

As to prisoners committed from prisons or penitentiaries, the act of June 23, 1874 (18 Stat. 252), provides:

Whenever such insane convict shall be restored to sanity, after he or she shall have been transferred under the provisions of this act, he or she shall be returned to the prison or penitentiary from which the transfer was made, provided the term of imprisonment shall not have expired \* \* \*.

Discharges are also recorded when patients are turned over to the Bureau of Immigration upon deportation warrant. The patient is surrendered upon presentation of the warrant to the superintendent irrespective of the patient's condition. The immigration authorities do, however, previous to removing a patient, seek certain information from the hospital as to the patient's condition primarily along the lines as to needs for attendants.

In the matter of release through action of the committing authority in directing the transfer of the patient to other hospitals, it appears that with the exception of patients sent to their home States by direction of the Commissioners of the District of Columbia and a few inmates of soldiers' homes returned thereto, the Director of the Veterans' Bureau is the only administrative head of all the executive and independent establishments of the Government who has removed patients from St. Elizabeths Hospital in this manner, and this action on his part was begun since May, 1926.

There follows herewith a statement prepared by a representative of the Veterans' Bureau relative to transfers of patients of that bureau from St. Elizabeths Hospital to Veterans' Bureau hospitals nearer the beneficiaries' homes:



May 26, 1926, 23 beneficiaries to Augusta, Ga.  
 May 28, 1926, 1 beneficiary to Bronx, N. Y.  
 June 3, 1926, 1 beneficiary to Philadelphia, Pa.  
 June 7, 1926, 1 beneficiary to St. Cloud, Minn.  
 June 7, 1926, 4 beneficiaries to Camp Custer, Mich.  
 June 7, 1926, 1 beneficiary to Danville, Ill.  
 June 8, 1926, 2 beneficiaries to North Little Rock, Ark.  
 June 10, 1926, 2 beneficiaries to Perry Point, Md.  
 June 10, 1926, 1 beneficiary to Bronx, N. Y.  
 June 12, 1926, 1 beneficiary to Knoxville, Iowa.  
 June 21, 1926, 1 beneficiary to North Little Rock, Ark.  
 June 23, 1926, 3 beneficiaries to Augusta, Ga.  
 July 10, 1926, 1 beneficiary to Mount Alto, Washington, D. C.  
 August 12, 1926, 1 beneficiary to North Little Rock, Ark.  
 August 13, 1926, 3 beneficiaries to Great Lakes, Ill.  
 August 18, 1926, 9 beneficiaries to Gulfport, Miss.  
 August 19, 1926, 2 beneficiaries to Great Lakes, Ill.  
 August 21, 1926, 4 beneficiaries to Sheridan, Wyo.  
 August 24, 1926, 9 beneficiaries to Augusta, Ga.  
 August 25, 1926, 14 beneficiaries to North Little Rock, Ark.  
 August 25, 1926, 1 beneficiary to Utica State Hospital.  
 August 25, 1926, 4 beneficiaries to St. Cloud, Minn.  
 August 28, 1926, 22 beneficiaries to Tuskegee, Ala.  
 September 1, 1926, 23 beneficiaries to Perry Point, Md.  
 September 3, 1926, 5 beneficiaries to Northampton, Mass.  
 September 4, 1926, 19 beneficiaries to Bronx, N. Y.  
 September 7, 1926, 9 beneficiaries to Knoxville, Iowa.  
 September 9, 1926, 9 beneficiaries to Gulfport, Miss.  
 September 13, 1926, 12 beneficiaries to North Chicago, Ill.  
 September 15, 1926, 13 beneficiaries to Palo Alto, Calif.  
 September 22, 1926, 23 beneficiaries to Bronx, N. Y.  
 September 25, 1926, 21 beneficiaries to Perry Point, Md.  
 September 30, 1926, 22 beneficiaries to Chillicothe, Ohio.  
 October 6, 1926, 25 beneficiaries to Perry Point, Md.  
 October 13, 1926, 27 beneficiaries to Perry Point, Md.  
 October 15, 1926, 1 beneficiary to Connecticut State Hospital, Connecticut.  
 October 19, 1926, 7 beneficiaries to Camp Custer, Mich.  
 October 19, 1926, 9 beneficiaries to North Little Rock, Ark.  
 October 22, 1926, 7 beneficiaries to Chillicothe, Ohio.  
 October 23, 1926, 3 beneficiaries to Tuskegee, Ala.  
 October 26, 1926, 3 beneficiaries to Augusta, Ga.  
 October 29, 1926, 6 beneficiaries to North Chicago, Ill.  
 October 29, 1926, 1 beneficiary to St. Cloud, Minn.  
 October 29, 1926, 2 beneficiaries to Knoxville, Iowa.  
 October 29, 1926, 2 beneficiaries to Sheridan, Wyo.  
 Total, 360.

On May 1, 1926, there were 948 bureau beneficiaries to St. Elizabeths Hospital and 28 beneficiaries were admitted to St. Elizabeths Hospital and were taken over on the rolls of the Veterans' Bureau during May, June, and August, 1926.

The movement of beneficiaries since May 1, 1926, is as follows:

	Dis-charge	Trans-ferred	Dead	Ad-mitted
May, 1926.....	24	24	4	20
June, 1926.....	17	17	0	6
July, 1926.....	26	1	3	0
August, 1926.....	15	69	1	2
September, 1926.....	25	156	4	0
October, 1926.....	11	93	0	0
Total.....	118	360	12	28

The total number of bureau beneficiaries remaining at St. Elizabeths Hospital November 1, 1926, is 486.

Of this number there are remaining in the hospital for the reason that their legal residences are in the District of Columbia or near-by Maryland and Virginia.....	94
Transfer refused by legal guardians or next of kin.....	101
Consents to transfer obtained but no beds available or transfer not yet feasible.....	110
Criminal cases, committed on court action.....	14
Foreign cases, no relatives nor authority to transfer from St. Elizabeths Hospital.....	26
Retired personnel of Army and Navy.....	7
Spanish-American War veterans.....	8
Pending cases, where no definite consent has been received.....	85
Cases on furlough or elopement, etc.....	30
Female beneficiaries, transfers refused, 10; transfers approved, 6; pending requests, 5.....	21
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The transfer of beneficiaries from St. Elizabeths Hospital is becoming more difficult for the reason that there are no vacant beds available in suitable hospitals nearer the patients' homes. For example, 38 consents have been received to transfer beneficiaries from St. Elizabeths Hospital to the hospital at Perry Point, but these patients can not be transferred because the medical officer in charge of the Perry Point Hospital states that he has no vacant beds.

#### IV. GUARDIANSHIP OF PATIENTS

The act of February 23, 1906 (33 Stat. 740), provides for the appointment in the District of Columbia of a committee or trustee of a person of unsound mind, as follows:

In case any such person adjudged to be of unsound mind has property, real or personal, the equity court of said District shall have full power in the same cause to appoint a committee or trustee of the person and estate of such person, according to the provisions of said code, and such committee or trustee shall reimburse, out of the funds of the lunatic, the District of Columbia for all court costs expended or incurred by it and for all moneys by it expended or costs incurred for and treating such insane persons up to the time of such appointment.

The code laws of the District of Columbia provide:

SEC. 115 b. *Estates of lunatics*.—The said court shall have full power and authority to superintend and direct the affairs of persons non compos mentis and to appoint a committee or trustees for such persons after hearing the nearest relatives of such person or some of them if residing within the jurisdiction of the court, and to make such orders and decrees for the care of their person and the management and preservation of their estates, including the collection, sale, exchange, and reinvestment of their personal estate, as to the court may seem proper \* \* \*. (Act March 3, 1901, 31 Stat. 524.)

The necessity is obvious for the appointment of some one to care for and handle the funds which may belong to an insane person and various ways have been employed to initiate the movement for the appointment of guardians for patients under treatment at St. Elizabeths Hospital.

The following is a tabulation compiled from the records of the disbursing office of the hospital pertaining to guardianship of patients in St. Elizabeths Hospital for the 10-year period ending June 30, 1926, and as of that date:

Guardian's name and address	For the 10-year period			As of June 30, 1926		
	Number of wards	Veterans' Bureau	Other than Veterans' Bureau	Number of wards	Veterans' Bureau	Other than Veterans' Bureau
American Trust Co., Nashville, Tenn.	2	2		2	2	
Baltimore Trust Co., Baltimore, Md.	7	6	1	4	4	
Commonwealth Trust Co., Pittsburgh, Pa.	13	13		11	11	
Commonwealth Title Insurance & Trust Co., Philadelphia, Pa.	29	28	1	19	18	1
Dailey, M. F., Louisville, Ky.	2	1	1	1		1
Delaware Trust Co., Chester, Pa.	2	2				
Dime Bank Title & Trust Co., Wilkes-Barre, Pa.	2	2		1	1	
Dyer, H., Greenville, Miss.	2	2		2	2	
Farmers & Mechanics Trust Co., Westchester, Pa.	2	2		1	1	
Fayette Title & Trust Co., Uniontown, Pa.	2	2		4	1	3
Federal American National Bank, Washington, D. C.	7	4	3	2	2	
Fenning, Frederick A.	165	93	72	65	39	26
First Trust & Savings Bank, Chicago, Ill.	2		2	1		1
Fredo, M. A., Boston, Mass.	2	1	1	2	1	1
Gallagher, J. J., Portland, Me.	2	2				
Hutchins, F., Boston, Mass.	2	2		1	1	
Klein, P. B., Washington, D. C.	2	1	1	2	1	1
Kensington Trust Co., Philadelphia, Pa.	3	3		2	2	
McCoy, P., Washington, D. C.	2	1	1	2	1	1
National Metropolitan Banking Co., Washington, D. C.	2	2		2	2	
Newton, G. D., Dansville, N. Y.	11	10	1	9	7	2
Peoples Savings & Trust Co., Pittsburgh, Pa.	3	3		2	2	
Pennsylvania Co., Washington, D. C.	2	1	1	1	1	
Pennsylvania Trust Co., Pittsburgh, Pa.	4	4		4	4	
Porter Title & Trust Co., Pittsburgh, Pa.	3	3				
Scott, G. W., Dansville, N. Y.	5	5				
South Side Trust Co., Pittsburgh, Pa.	2	2		2	2	
Standard Trust & Savings Bank, Chicago, Ill.	2	2		2	2	
Title Trust Co. of Philadelphia, Philadelphia, Pa.	2	2		2	2	
Union Trust Co. of Detroit, Detroit, Mich.	6	6		4	4	
Washington Loan & Trust Co., Washington, D. C.	2		2	2		2
York Trust Co., York, Pa.	2	2		2	2	
Youngman, N. G., Dansville, N. Y.	2	2		2	2	
Total wards (guardians having more than 1 ward)	298	211	87	156	117	39
Total wards (guardians having 1 ward each)	680	537	143	346	259	87
Total wards	978	748	230	502	376	126
Total guardians	713	572	141	345	258	87

It appears that in the majority of cases the initiatory movement leading to the appointment of a guardian had its origin in one of two sources: (1) The independent and executive establishments of the Government from which money is due the patient, and (2) the superintendent of St. Elizabeths Hospital.

The above tabulation gives the number of cases in which Mr. Frederick A. Fenning, Washington, D. C., was appointed as committee by the courts of the District of Columbia. As the matter of the appointment of Mr. Fenning in so many cases was the subject of investigation by three separate committees of the Congress, it is deemed not necessary to go into this subject in detail in this report.

The petitions for the writs de lunatico inquirendo filed by Mr. Fenning out of which in many cases followed his appointment as guardian or committee were prepared as the result of letters addressed to him from the Bureau of War Risk Insurance, the Navy Depart-

ment, the War Department, the Veterans' Bureau, etc. These letters were in form as follows:

GUARDIANSHIP—JOHN W. GASKELL

TREASURY DEPARTMENT,  
BUREAU OF WAR RISK INSURANCE,  
Washington, April 7, 1920.

In reply refer to C-313596 John W. Gaskell, private, Company C, Ninth Infantry.  
SUPERINTENDENT ST. ELIZABETHS HOSPITAL,  
Washington, D. C.

DEAR SIR: We have in our files an application for compensation of the above-named claimant, at present an inmate of your hospital, suffering from a mental disability received while in the military service.

We wish to advise you that this claimant is entitled to compensation under the provisions of the war risk insurance act, but if his mental condition is such that he is not mentally competent to transact business, we would respectfully request that you have a guardian appointed by the court to receive this compensation for him. As soon as the appointment has been completed, a certified copy of the court order or decree of guardianship should be forwarded to this bureau. Upon receipt of same an award of compensation will be made in this case.

All future correspondence relative to this case should bear the full name of the above-named discharged soldier, his former rank and organization, as well as our file number C-313596.

By authority of the Director:

Very truly yours,

R. H. HALLETT,  
Assistant Director In Charge of Compensation  
and Insurance Claims Division.  
(Signed) M. A. E.

APRIL 10, 1920.

From: Superintendent, St. Elizabeths Hospital, Washington, D. C.  
To: R. H. Hallett, assistant director, in charge of compensation and insurance claims division.  
Subject: Gaskell, John W., Private, Company C, Ninth Infantry. C-313596.  
Reference: Your letter of April 7, 1920: per M. A. E.—M.A.E.-mj-12.

In reply to the above reference you are advised there is no correspondence from relatives or friends on file at this hospital. The only address is that given in the Army history, (aunt) Jamina Smith, 14 Clinton Street, Paterson, N. J.

This patient, as indicated in the history already forwarded to the bureau and in progress note given below, is undoubtedly incompetent to handle his compensation checks. In view of the request contained in the above reference, it is suggested that Mr. Frederick A. Fenning, Evans Building, Washington, D. C., be appointed as committee. Mr. Fenning has been advised as to the above and will undoubtedly communicate with the bureau in the near future.

April 8, 1920.—This man is confined to his bed; shows considerable mental deterioration. Can answer simple questions; talks fairly revelantly and coherently but his remarks are quite brief. Seems quite weak and requires constant supervision.

(Signed) Dr. D. C. MAIN,  
Clinical Director.

JKF-jtf.

NOTE.—The initials "JKF" appended to the above letter are those of Dr. Justin K. Fuller, who dictated the letter and who at that time was the liaison officer of the Bureau of War Risk Insurance stationed at St. Elizabeths Hospital.

This office has been unable to learn in how many cases the Bureau of War Risk Insurance and the Veterans' Bureau communicated with Mr. Fenning, for the only cases which come to notice are those in which Mr. Fenning was eventually appointed.

In the matter of whether Mr. Fenning wrote to the known next of kin in all cases referred to him and whether he received instruc-



tions therefrom before proceeding to have himself appointed guardian, he has been interviewed and willingly showed the representatives of this office carbon copies from his files of the letters which he stated had been written. In particular cases of which information was requested, selected at random by the examiner of this office, Mr. Fenning produced his files which showed facts such as follows:

Bureau of War Risk wrote Mr. Fenning in a particular case April 28, 1919, inviting attention to the fact that a certain person was shown as next of kin. Mr. Fenning wrote said next of kin April 30, 1919, and again May 16, 1919, to which no replies were received. Mr. Fenning then inquired of and learned from St. Elizabeths Hospital the name of another next of kin to whom he wrote July 31, 1919. On August 13, 1919, the Bureau of War Risk Insurance again wrote Mr. Fenning inquiring as to the action taken. August 21, 1919, Mr. Fenning replied that he had been unable to get a reply from any of the next of kin to whom he had written. On August 23, 1919, the Bureau of War Risk Insurance wrote urging him to proceed to the appointment of a guardian or committee.

In another case several letters written to the next of kin having been returned through inability of the postal authorities to make delivery to the addressee, Mr. Fenning, through his own initiative, secured the name of a brother to whom he wrote. The brother turned the matter over to his attorney, who corresponded thenceforth with Mr. Fenning.

Mr. Fenning's files in several of such cases were presented on request and each showed that efforts had been made to communicate with the next of kin and receive instruction before he proceeded to have himself appointed.

The cases in which the superintendent of St. Elizabeths Hospital initiated the action which resulted in the appointment of guardians for patients have been by reason of facts such as presented in the following petition:

IN THE SUPREME COURT OF THE DISTRICT OF COLUMBIA.—HOLDING AN EQUITY COURT

(Filed May 13, 1920.—J. R. Young, clerk)

In re: Sylvanus V. Lake, alleged lunatic. Lunacy No. 8365.

The petition of William A. White, respectfully shows the court:

1. That he is a citizen of the United States, and is the superintendent of St. Elizabeths Hospital, and that he files this petition as the next friend of Sylvanus V. Lake.

2. That said Sylvanus V. Lake was admitted to St. Elizabeths Hospital by order of the Board of Managers U. S. Soldiers' Home the 20th day of January 1920, has been continuously since that time, and is now a patient under treatment in said hospital.

3. That said Sylvanus V. Lake is a widower, and that, so far as your petitioner is aware, he has no relatives in this jurisdiction, that he has no property other than retired Army pay.

4. That in order that said funds may be used from time to time for the benefit of said Sylvanus V. Lake, it is necessary that a committee be appointed for him.

Wherefore, the premises considered, your petitioner asks:

1. That a writ de lunatico inquirendo be issued by this court.

2. That the court appoint a committee for said Sylvanus V. Lake, under such bond as may be deemed necessary, your petitioner suggesting that Frederick A. Fenning, a member of the bar of the Supreme Court of the District of Columbia,

who is experienced in lunacy matters, has expressed a willingness to act as such committee.

3. And for such other and further relief as to the court may seem meet.

WILLIAM A. WHITE.

I do solemnly swear that I have read the foregoing petition by me subscribed and know the contents thereof, and that the statements made therein upon information and belief I believe to be true, and the statements made therein upon my personal knowledge are true.

WILLIAM A. WHITE.

DISTRICT OF COLUMBIA, SS:

Subscribed and sworn to before me this 11th day of May, 1920.

[SEAL.]

FRANK M. FINOTTI,  
Notary Public.

A statement presented by the superintendent shows the following as the number of cases during the 10-year period ending June 30, 1926, in which the superintendent initiated the action for the appointment of guardians for patients under treatment at St. Elizabeths Hospital:

From—

July 1, 1916, to Dec. 31, 1916.....	7
Jan. 1, 1917, to Dec. 31, 1917.....	7
Jan. 1, 1918, to Dec. 31, 1918.....	2
Jan. 1, 1919, to Dec. 31, 1919.....	57
Jan. 1, 1920, to Dec. 31, 1920.....	20
Jan. 1, 1921, to Dec. 31, 1921.....	1
Jan. 1, 1922, to Dec. 31, 1922.....	0
Jan. 1, 1923, to Dec. 31, 1923.....	1
Jan. 1, 1924, to Dec. 31, 1924.....	4
Jan. 1, 1925, to Dec. 31, 1925.....	1
Jan. 1, 1926, to June 30, 1926.....	0
Total.....	100

Number of patients admitted from July 1, 1916, to June 30, 1926..... 10, 321

To give to the director of the Veterans' Bureau a control in the matter of guardians of beneficiaries, the act of July 2, 1926, 44 Stat. 791, contained the following as amendments to the act of June 7, 1924, 42 Stat. 147:

#### TITLE 1

Sec. 21. (1) That where any payment under this act is to be made to a minor, other than a person in the military or naval forces of the United States, or to a person mentally incompetent, or under other legal disability adjudged by a court of competent jurisdiction, such payment may be made to the person who is constituted guardian, curator, or conservator by the laws of the State of residence of claimant, or is otherwise legally vested with the care of the claimant or his estate: *Provided*, That as to cases arising in the District of Columbia where in the opinion of the director any guardians, curator, conservator, or other person is acting as fiduciary in such a number of cases as to make it impracticable, to conserve properly the estates or to supervise the persons of the wards, the director is hereby authorized to refuse to make future payments in such number of cases as he may deem proper: *Provided further*, That prior to receipt of notice by the bureau that any such person is under such other legal disability adjudged by some court of competent jurisdiction, payment may be made to such person direct: *Provided further*, That for the purpose of payment of benefits under title 2 hereof, where no guardian, curator, or conservator of the person under a legal disability has been appointed under the laws of the State of residence of the claimant, the director shall determine the person who is otherwise legally vested with the care of the claimant or his estate.

(2) Whenever it appears that any guardian, curator, conservator or other person is not, in the opinion of the director, properly executing the duties of his trust or has collected or is attempting to collect fees, commissions, or allowances

that are inequitable or are in excess of those allowed by law for the duties performed or expenses incurred, or has failed to make such payments as may be necessary for the benefit of the ward of the dependents of the ward, then and in that event the director is hereby empowered by his duly authorized attorney to appear in the court which has appointed such fiduciary and make proper presentation of such matters to the court: *Provided*, That the director in his discretion may suspend payments to any such guardian, curator, conservator, or other person who shall neglect or refuse, after reasonable notice, to render an account to the director from time to time showing the application of such payments for the benefit of such minor of incompetent beneficiary.

Authority is hereby granted for the payment of any court or other expenses incident to any investigation or court proceeding for the appointment or removal of any guardian, curator, conservator, or other person legally vested with the care of the claimant or his estate, or in connection with the administration of such estates by such fiduciaries, when such payment is authorized by the director.

#### TITLE 5

SEC. 505. Every guardian, curator, conservator, committee, or person legally vested with the responsibility or care of the claimant or his estate, having charge and custody in a fiduciary capacity of money paid under the war risk insurance act as amended, or under the World War veterans' act, 1924, for the benefit of any minor or incompetent claimant, who shall embezzle the same in violation of his trust or fraudulently convert the same to his own use, shall be punished by fine not exceeding \$2,000 or imprisonment at hard labor for a term not exceeding five years, or both.

SEC. 506. The provisions of this title shall be applicable to the administration of this act in the Philippine Islands.

### V. GENERAL ADMINISTRATION

St. Elizabeths Hospital comes under the jurisdiction of the Department of the Interior and is administered by a board of visitors and a superintendent.

#### (1) BOARD OF VISITORS

Sections 4840 and 4842 of the Revised Statutes provide as follows:

SEC. 4840. Nine citizens of the District of Columbia, to be appointed by the President, shall constitute a Board of Visitors of the Hospital for the Insane. The term of office of three visitors shall expire biennially on the thirtieth day of June in every alternate year dating from the thirtieth day of June, eighteen hundred and fifty-seven. The office of visitor shall be honorary and without compensation.

SEC. 4842. The Board of Visitors, subject to the approval of the Secretary of the Interior, may make any needful by-laws for government of themselves, and of the superintendent and his employees, and of the patients, not inconsistent with law; they shall visit the hospital at stated periods, and exercise so careful a supervision over its expenditures and general operations that the Government and community may have confidence in the correctness of its management; they shall make annually to the Secretary of the Interior a report for the preceding fiscal year, setting forth the condition and wants of the institution.

The Board of Visitors holds regular meetings at the hospital on the first Tuesday in April and October of each year and such special meetings as the president of the board may from time to time deem advisable to call. The board at its regular meetings considers administration questions of the hospital; its needs, policies, and organization; makes rules and regulations governing the personnel and fixes the duties and qualifications of same; it also approves appointments, promotions, and dismissals of the higher grade officers. In addition the board at its October meetings considers the annual

report to the Secretary of the Interior, and the president of the board at the same meetings appoints visiting committees of three members each.

Paragraph 8 of page 4 of the by-laws of the Board of Visitors provides that: "It shall be the duty of these committees to visit and inspect the hospital on the first Tuesday of each month in which it is not inspected by the Board." The secretary of the board, who is the superintendent of the hospital, prepares a roster of these visiting committees, a copy of which is furnished each member, showing the date of inspection and the service or activity to be inspected.

11. The result of every inspection will be carefully and fully entered upon a book of record of inspection provided for that purpose, stating in detail the particular character of the inspection made and the portions of the hospital examined. Every defect or error noted shall be recorded with the recommendation made for its correction, and copy of such report forwarded to the Secretary of the Interior.

12. So far as practicable, this inspection shall include the conditions and care of the persons of the patients, the condition of the wards and the various detached buildings occupied by patients, including the heating, ventilation, and plumbing, and the character of the house furnishings, the character and sufficiency of the food supply, and the method of its preparation and distribution, the quality and extent of the supply of water, and the condition of the laundry, kitchens, shops, and farm, garden, and cemetery.

13. The office of visitor being honorary and without compensation, the superintendent will furnish means of conveyance to and from the hospital for all the meetings, either stated or special, and for the members of the visiting committees at times designated, or for any member of the board at any time desiring to officially visit the hospital.

Section 4842 of the Revised Statutes evidently contemplated that the board of visitors should form an integral part of and be a very definite factor in the management of St. Elizabeths Hospital.

In the early days, when the institution was small, the board may have served in an active capacity, but the records for the past 10 years do not indicate that the members have made the frequent inspections and maintained the close personal contact with the institution and its inmates as was contemplated by the law. The membership of the board within recent years has included some very busy men and women, such as the Surgeons General of the Army, Navy, and Public Health Service, a judge of the Supreme Court of the District of Columbia, a lawyer and a dentist actively engaged in their professions, and a minister of one of the large churches of the city, and their other activities may account for what at present appears to be the prevailing thought that the function of the board is primarily "to uphold the hands of the superintendent."

The minutes of the annual, semiannual, and special meetings indicate that there was a fairly full attendance of the membership and that the matters discussed and acted upon were mainly those which were brought up by the superintendent.

The minutes of the monthly meetings for inspection purposes do not show that such meetings were very well attended by the committee members and that their detailed and comprehensive inspection duties were being performed.

The following is a summary of the entries appearing in the minute book of the monthly visits of the various members of the board of visitors. The entries seldom exceed four or five lines of handwriting,



and the matter inserted under "activities inspected and matters considered" is an exact copy thereof.

Date of inspection	Members present	Activities inspected and matters considered
1916		
July 11.....	Doctor Harban.....	Stables, new cow barns, etc., were inspected.
Aug. 1.....	None.....	
Sept. 5.....	Mr. Smoot.....	He did not visit the wards, stating that his interests were chiefly directed toward the business end of the institution.
Dec. 5.....	Mrs. Sharpe, General Braisted.....	Buildings C, M, the Nurses' Home, and the Administration Building were inspected.
1917		
Jan. 2.....	Mrs. Hopkins, Mr. Smoot, Mr. Grosvenor.....	The detached service was visited. Atkins Hall, the Allison wards, the congregate dining room, the detached kitchen and the shops were inspected.
Feb. 6.....	None.....	
Mar. 6.....	Mrs. Hopkins.....	
May 1.....	General Gorgas.....	Brought with him Colonel Goodwin of the medical corps of the English Army, at present in this country with the British Commission. Colonel Goodwin was ready to answer all questions about the medical service and gave some valuable information with regard to the incidence of mental disease in the British Army, and offered to write home at once for more detailed information for use in getting ready to deal with this form of illness in our own military establishment.
June 5.....	None.....	
July 3.....	do.....	
Aug. 7.....	General Braisted, General Blue, General Gorgas.....	Visited and inspected the new dairy barns, the old dairy barn, which is being remodeled, and the dairy herd.
September.....	None.....	
October.....	Annual meeting.....	
Nov. 6.....	Mrs. Hopkins, Mr. Grosvenor.....	
Dec. 4.....	Doctor Harban.....	The remodeled old cow barn on the east side of Nicholas Avenue and the new barns and dairy herd were visited and inspected.
1918		
Jan. 3.....	Mrs. Hopkins, Mr. Smoot.....	
February.....	None.....	
Mar. 5.....	Mrs. Hopkins.....	
May 7.....	General Gorgas, Mrs. Sharpe.....	The storerooms, bakery, and main kitchen were inspected.
June.....	None.....	
July 2.....	Doctor Harban, Mr. Smoot.....	The serious condition surrounding the institution as a result of shortage of employees, threatened strikes, etc., was gone over with considerable detail and ways and means discussed for meeting the emergencies as they may arise.
Aug. 6.....	General Braisted.....	The matter of the great number of vacancies on the staff of employees was taken up with him and a tentative plan of action addressed to correcting the difficulties was outlined. The new buildings in process of erection were visited and inspected.
Sept. 3.....	Mr. Nicolson.....	With the superintendent made a tour of the grounds and went through the cow barns, the stable, and the new buildings.
October.....	Annual meeting.....	
Nov. 5.....	General Gorgas, Mrs. Hopkins, Mr. Grosvenor.....	The existing emergency in the hospital situation, due to the shortage of employees, was discussed, and arrangements were made whereby he will accompany the superintendent next week in a visit to the new Surgeon General, General Ireland, and discuss the matter fully with him.
Dec. 3.....	Doctor Harban.....	
1919		
Jan. 7.....	Mr. Smoot.....	
Feb. 5.....	None.....	
Mar. 4.....	Mrs. Hopkins.....	
Apr. 1.....	Semiannual meeting.....	
May.....	None.....	
May 20.....	Special meeting.....	
June.....	None.....	
July.....	do.....	
August.....	do.....	
September.....	do.....	
Sept. 12.....	Special meeting.....	
Oct. 6.....	Annual meeting.....	

Date of inspection	Members present	Activities inspected and matters considered
1919		
Nov. 4.-----	Mrs. Hopkins, Miss Gwynn.---	The matter of the plans for the reorganization of the institution were discussed at considerable length. Several of the wards in the main building were visited and all of the wards of the semipermanent buildings, including ward 7, which is now being used for instruction of patients in occupational therapy, were visited.
Dec. 3.-----	Admiral Braisted, Doctor Pierce.	The time of the meeting was spent in a discussion of the many changes effected in the hospital in the recent three months and in putting Doctor Pierce, who is a new member of the board, in touch with the issues.
1920		
Jan. 2.-----	None.-----	The progress in the reorganization of the institution was discussed with him in detail and he visited maple and cherry wards, the Knights of Columbus toy shop, which is just about ready to put into commission, the Red Cross building, and L building, which is now being used as a portion of the Psycho-chiropeutic Department.
Feb. 3.-----	Admiral Braisted.-----	
Mar. 2.-----	Doctor Pierce.-----	L building and the semipermanent groups were inspected.
Mar. 17.-----	Admiral Braisted, General Ireland.	The following portions of the institution were visited and inspected: The administration building, buildings B, C, L, nurses' home, Toner building, Howard Hall, the tuberculosis cottage for white women, the semipermanent buildings, the dairy barns, piggeries, and Godding Croft. A number of persons were interviewed, in particular, the administrative assistant to the superintendent, Mr. Sanger; the chief of the training school for nurses, Miss Vaughn; several of the physicians and nurses; the chief engineer was seen, and Mr. Connors at Godding Croft. The A building kitchens, the Red Cross building, and the Knights of Columbus building (toy shop), and the amusement hall were also visited and inspected.
Mar. 26.-----	Admiral Braisted, Doctor Harban, Secretary Payne of the Department of the Interior.	The administration building, C building, L building, amusement hall, Red Cross and Knights of Columbus buildings, semipermanent buildings were visited, and a tour of the grounds was made.
April.-----	Semi-annual meeting.-----	The following portions of the institution were inspected: The bakery, employees' dining room, main kitchen, cold storage, storerooms, electrician shops, tin shops, laundry, employees' quarters over the laundry, detached kitchen, detached dining room, several of the wards of the detached service, the shops of th detached service and the fire house.
May 4.-----	General Ireland, Mrs. Hopkins, and Doctor Pierce.	
June 1.-----	Dr. Hugh S. Cumming.-----	The affairs of the institution were discussed, particularly the matter of its shortage of coal. Matters of general interest were discussed and R building was inspected.
July 6.-----	Mr. Smoot.-----	
Aug. 3.-----	Admiral Braisted, General Ireland.	The general state of the hospital was discussed.
September.-----	None.-----	
October.-----	Annual meeting.-----	The various problems of the institution, present and future, were discussed at considerable length. The hospital affairs were discussed at some length.
November.-----	None.-----	
Dec. 7.-----	Admiral Braisted, Doctor Harban.	Made a tour of the grounds and visited especially the semipermanent buildings and the administration building.
1921		
Feb. 1.-----	Admiral Braisted.-----	The various problems of the institution, present and future, were discussed at considerable length. The hospital affairs were discussed at some length.
Mar. 1.-----	Mr. Smoot, Doctor Pierce.-----	
May 3.-----	General Ireland, Doctor Pierce.-----	Made a tour of the grounds and visited especially the semipermanent buildings and the administration building.
June.-----	None.-----	
July 5.-----	Mr. Edson.-----	Made a tour of the grounds and visited especially the semipermanent buildings and the administration building.
Aug. 2.-----	None.-----	
Sept. 6.-----	Doctor Taylor.-----	Made a tour of the grounds and visited especially the semipermanent buildings and the administration building.
October.-----	Annual meeting.-----	
Nov. 1.-----	Mrs. Hopkins, General Ireland.-----	Made a tour of the grounds and visited especially the semipermanent buildings and the administration building.
December.-----	Admiral Stitt.-----	
1922		
Jan. 3.-----	Dr. L. H. Taylor.-----	Made a tour of the grounds and visited especially the semipermanent buildings and the administration building.
February.-----	No meeting.-----	
Mar. 7.-----	Doctor Pierce, Doctor Taylor.-----	Made a tour of the grounds and visited especially the semipermanent buildings and the administration building.
April.-----	Semiannual meeting.-----	
May.-----	None.-----	Made a tour of the grounds and visited especially the semipermanent buildings and the administration building.
June.-----	do.-----	
July.-----	do.-----	

Date of inspection	Members present	Activities inspected and matters considered
1922		
Aug. 1.....	Admiral Stitt, General Cumming.	The cow barns and garage were inspected.
September.....	No meeting.....	
October.....	Annual meeting.....	
November.....	General Ireland, Mrs. Hopkins, Miss Gwynn.	
Dec. 5.....	Admiral Stitt, Doctor Harban.	There were present also at the meeting four of the hospital chaplains (viz, Revs. Stevenson, Cummings, Butler, and Liljencrants) for the purpose of discussing ways and means for improving the religious services rendered the hospital.
1923		
Jan. 2.....	Doctor Taylor.....	
Feb. 6.....	Admiral Stitt, General Cumming.	
March.....	None.....	
April.....	Semiannual meeting.....	
May.....	General Ireland, Mrs. Hopkins.	Inspected the cold-storage plant, main kitchen, bakery; visited the sites of the new building operations, namely the cafeteria, laboratory, and isolation buildings.
June.....	No meeting.....	
July 3.....	Justice Hoehling.....	He made a general survey of the grounds, visited the new laboratory and isolation buildings now under construction. Went through R building, C building, semipermanent buildings, and the offices.
Aug. 4.....	No meeting.....	Admiral Stitt was communicated with over the phone in regard to holding meeting of board on Tuesday and suggested, in view of death of President Harding, same be postponed.
September.....	No meeting.....	
October.....	Annual meeting.....	
November.....	General Ireland, Mrs. Hopkins, Miss Maury.	
December.....	Admiral Stitt.....	With the superintendent, inspected the tunnels in the main building where the fire-proofing work is being done, the bakery, the general kitchen, and the storehouse, particularly the cold-storage part.
1924		
Jan. 9.....	Doctor Taylor, Miss Maury.....	
Feb. 5.....	Admiral Stitt, General Cumming.	The following wards were visited: Howard Hall, Dawes basement, Dawes first and second, white ash, gray ash, Garfield basement, Garfield first and second, and oak.
Dec. 9.....	Admiral Stitt, General Hines.	Inspection consisted of making a trip throughout the reservation.
1925		
Jan. 6.....	Doctor Taylor, Mrs. Hopkins, Miss Maury.	
Feb. 3.....	Admiral Stitt.....	Inspected the bakery, general kitchen, Dix-2 building, and site for porches that will be built in connection with retreat building.
June 2.....	Admiral Stitt.....	The laboratory and operating room were visited.
July 7.....	Doctor Taylor.....	The cellars of the main building were inspected for the purpose of examining the work of fire-proofing.
Sept. 1.....	Judge Hoehling, Doctor Taylor.	The plan that is being developed for the extension of the institution by additional construction was discussed.
October.....	Annual meeting.....	
Nov. 3.....	General Ireland, Miss Maury.....	
Dec. 1.....	Admiral Stitt.....	
1926		
Jan. 5.....	Mrs. Hopkins, Miss Maury, Doctor Taylor.	
Feb. 2.....	None.....	
Mar.....	do.....	
Apr.....	Semiannual meeting.....	
May.....	None.....	
June.....	do.....	

## (2) SUPERINTENDENT

The duties of the superintendent of the hospital are defined by section 4839 of the Revised Statutes as follows:

The chief executive officer of the hospital for the insane shall be a superintendent, who shall be appointed by the Secretary of the Interior \* \* \*, and shall give bond for the faithful performance of his duties, in such sum with such

securities as may be required by the Secretary of the Interior. The superintendent shall be a well-educated physician possessing competent experience in the care and treatment of the insane; he shall reside on the premises, and devote his whole time to the welfare of the institution; he shall, subject to the approval of the visitors, engage and discharge all needful and usual employees in the care of the insane, and all laborers on the farm, and determine their wages and duties; \* \* \*, and shall be the ex officio secretary of the board of visitors.

The superintendent as the chief executive and administrative officer is directly charged with responsibility for the business management of the hospital and its subsidiary activities as well as the institutional and medical care of the patients. His administrative duties are to an extent controlled by the policies adopted by the Secretary of the Interior and by the board of visitors. He appears to have entire responsibility for the institutional and medical care of patients and the conducting of scientific research.

For general administration purposes the activities of the hospital are divided into two main divisions, the head of each of which reports direct to the superintendent: (1) The medical division under the direct supervision of the first assistant physician, and (2) the division of business administration under the direct supervision of the administrative assistant. The medical division exercises exclusive supervision over the medical activities of the hospital and the division of business administration exclusive supervision over the nonmedical activities.

When St. Elizabeths Hospital was established, the act of March 3, 1855, provided that its object should be "the most humane care and enlightened curative treatment of the insane." Originally the institution was designated "The Government Hospital for the Insane," and while it was to be open to the members generally of the Army and the Navy it was also to constitute the insane hospital for the District of Columbia and could admit private pay patients therefrom.

Its establishment contemplated more than an institution for the confinement of the insane and was accordingly designated a hospital where should be employed "enlightened curative treatment."

While the institution is by law designated as a hospital for the insane, the present law for the District of Columbia (which is turned to by the court in all proceedings relative to commitment) provides for the admission to St. Elizabeths Hospital of indigent insane irrespective of the nature of the mental disorder, but limits the admission of nonindigents to those persons only having homicidal or otherwise dangerous tendencies.

The policy of the hospital, as repeatedly expressed by the superintendent and his assistants during this investigation, and as evidenced by an examination of the records, has been and is to give treatment to all persons suffering from mental disorders who are sent thereto by authority of law, and to make of the institution a leading center in the study of cause and effect of all forms of mental disorder and of the treatment therefor.

The pursuance of this policy may to an extent account for there having been admitted to the hospital and held therein many persons suffering from unbalanced or feeble-minded conditions, irrespective of whether the affliction constituted insanity within the meaning of that term as applied by the hospital and in professional terminology.



It is claimed for this policy that the opportunity thus afforded to study these various forms of mental weakness and disorder and the effect of the treatments employed not only affords persons so afflicted an opportunity for readjustment but is productive in scientific advice which is being applied through schools and elsewhere in the efforts being made to prevent conditions which lead to mental disorders and insanity.

## VI. MEDICAL DIVISION

The medical division, under the general supervision of the first assistant physician, directs all activities and facilities of the hospital having to do with the care and treatment of patients. For administrative purposes this division is divided into a number of services, each of which is supervised by a medical officer, who in turn is assisted by other medical officers, associate and junior medical officers, nurses, and attendants.

The number of patients treated is such that all ordinary and many rare and unusual conditions present themselves so that this hospital is required to have equipment, personnel, and appliances to deal with all its various problems.

### (1) RECEIVING OF PATIENTS

All patients received into the hospital are assigned a case number and are registered by the chief clerk, or in his absence by the officer of the day. The sufficiency of the commitment authority is determined and the patient is assigned to one of the designated receiving wards in that part of the hospital which provides for the particular class or type of patient to which he belongs.

The hospitalization of the patient population is divided into the male and female services, and each of these divisions are further divided into white and colored, with a further separation of each into classes or types of patients.

In the male service the United States Army and Navy officers and retired officers are received in a ward of the west side department. All of the colored male patients and all of the male Federal and District of Columbia prisoner patients, both white and colored, are received in different wards of the Howard Hall department and other white male patients are received in a ward termed the "receiving department."

Female patients, white or colored, are received in certain wards so designated by the hospital for that purpose in the female department. After entering the receiving ward of one of the departments, the patient is bathed by a hospital nurse or attendant. During the course of the bath an examination and a record is made of any marks or bruises on the body of the patient. The supervisor, or acting supervisor, inventories and records any property, clothes, money, or other effects accompanying the patient. Money, in excess of a small amount for personal comforts, and valuables are turned in to the hospital property clerk, for which the supervisor takes a receipt. The inventory record is made in duplicate, so that one copy may be retained by the patient. On or before the second day following admis-

sion the patient is seen and talked to by a psychiatrist. This doctor records in the form of an admission note which becomes a part of the hospital clinical record on the patient, the phases of his observation during that examination and the statements made by the patient that will be of assistance in reaching a diagnosis.

Following that examination and report the case is assigned to an assistant physician attached to the service to "work up." The patient receives from this doctor a complete mental and physical examination. The physical examination includes any needed laboratory tests by the laboratory and dental examinations by the dental clinic. The findings of the mental examination including any pertinent facts with respect to the patient's history and habits and the findings of the physical examination are recorded in the clinical record of the patient in the manner shown by Exhibit A. The patient's photograph is also taken and included in the clinical record.

At the expiration of three weeks following admission the reports of the doctor assigned to "work up" a particular case are available to the hospital staff. The patient, if his condition will permit, is then presented at a preliminary medical conference, the conferees of which include, among others, the first assistant physician, the clinical directors, the clinical psychiatrist, and the director of occupational therapy. At this conference the patient is further examined, the reports of the doctor to whom the cases was assigned are considered a tentative diagnosis is made, and the proper course of treatment is prescribed.

Following the preliminary conference, the patient is assigned to a ward where the treatments prescribed are administered.

## (2) GENERAL CARE AND TREATMENT OF PATIENTS

The preliminary step in the care and treatment of patients consists in segregating the different classes, first by sexes and then between white and colored. On the male service a further separation effects the grouping of the insane criminals and the criminally insane and officers and retired officers of the Army and Navy. Following these primary classifications, the patients are segregated, so far as it is possible to do so, on a behavioristic basis. This segregation results in a separation of the disturbed and undisturbed; the tidy and untidy; the homicidal, suicidal, destructive, combative and custodial. The furnishing of wards, to a large extent, is based on the type of patients. On wards housing tidy, undisturbed, and nondestructive patients, rugs, pianos, radios, billiard tables, etc., are used to the extent of their availability. On the wards of untidy and destructive patients there are no rugs, and the furniture consists principally of wooden or cane-bottom rockers, wooden settees or benches, and small tables for games. The wooden floors in these wards, some of which are covered with linoleum, are waxed daily.

Patients on any wards of the hospital are constantly under the observation and surveillance of nurses and attendants. The doctors assigned to particular wards make the rounds of their words twice during the day and once during the night. A memorandum record is kept by the nurses and attendants of any unusual facts respecting each patient, and not less than once each month a report is made by the nurses and attendants for the clinical record maintained for each patient. It is the practice for the doctors to make notes for

the patient's clinical record not less than once each month on all cases in the hospital less than one year, and once every three months on cases over one year. Any physical defects, dental troubles, or periods of mental excitement are brought to the doctor's attention, either by attendants or nurses, or by their own observation. Slight physical ailments are treated in the ward. Patients becoming seriously ill, suffering from social or other contagious diseases, or in need of operations are transferred to a ward of the medical and surgical service. Patients in need of dental work are either allowed to go or taken to the dental clinic. The three principal divisions of the treatment of mental diseases are the general medical treatment, the psychological, and the social therapeutics.

For general medical treatment there is provided a medical and surgical hospital, conditions pertaining to which are hereinafter considered. As to the psychological treatment, there is a group of psychiatrists who are separated from the necessity of dealing with administrative problems and who can devote their whole time to first-hand dealing with the patients. It is the function of these psychiatrists to talk over at great length with the patients their difficulties and endeavor to bring the patient to a realization of how he has gone astray in his dealing with his life's problems; what have been the factors that have finally resulted in his mental illness; whether these factors be environmental and outside the control of the patient, or whether they be factors of personal make-up, temperamental characteristics, and the like. If the patient can be brought to an understanding of what has happened, the effort is then made to show him how the dangers he has encountered in the past may be avoided in the future. As to social treatment it appears that the patient is a mental patient largely because he has become excessively self-centered and has lost his vital interest in the world about him. The therapeutic effort, therefore, becomes directed toward reestablishing this interest, and for this purpose amusements, such as theatricals, moving pictures, music, athletics, field-day sports and games, all of which have in view social values, are utilized. In other words, the sort of amusements chosen are largely those that call for the cooperation of groups of patients, such as in field-day sports, baseball, basket ball, etc. More definite social characteristics are seen in the weekly dances and in social gatherings. The Red Cross house is the social center for various activities and the patients meet there and play cards, chat, and otherwise make social contacts.

### (3) SOCIAL AND RECREATIONAL ACTIVITIES OF PATIENTS

#### (A) ACTIVITIES ENTIRELY CONTROLLED BY THE HOSPITAL

Open-air exercise each day, weather permitting.

One baseball field and three tennis courts.

Dances weekly during winter months.

Playing cards, chess, and checkers are furnished wards.

Pianos are supplied to certain wards, and a semipermanent ward has a radio with loud speaker. Quite a number of patients have their own private radio-receiving sets. Five new radio sets with loud speakers were recently donated.

On wards of women's service there are monthly parties, consisting of refreshments, card playing, dancing, and singing. Each year Christmas parties are held, with the singing of carols, dancing, etc. At other times, upon the suggestion of physicians, teas, musicals, and receptions are arranged, at which there are fancy dances, recitations, and vocal and instrumental music. Usually there is an annual Halloween party.

*Library.*—The patients' library was started by Doctor White in 1905 with about 500 volumes. This library has now grown to some 10,000 volumes, all properly catalogued, embracing history, biography, technical works, encyclopedias, and fiction, and occupies two rooms in Center Building, one of which is fitted as a reading room. Thirty-five periodicals are subscribed for regularly, eight are donated, and eight daily and Sunday newspapers are taken. One Polish newspaper is donated. The books are purchased or donated, the hospital buying from 400 to 500 volumes a year. The net increase averages 400 volumes annually.

Since June of 1925 the Congressional Library has been sending surplus accretions of magazines to this library to the extent of some 1,000 a month. The chamber of commerce also sends surplus magazines to this library.

The library is open from 9 to 4.30 every day except Sunday, and its facilities are available to all paroled patients. Books are supplied to those patients without parole who are brought over by attendants, and to those who desire books and can not get out they are sent. About 3,000 books are constantly in circulation among about two-thirds of the hospital population.

Previous to the current calendar year about 400 books were bound annually at the hospital, including certain of the magazines subscribed for. From January to July, 1926, 919 volumes were bound. Some of this work by patients is well done.

*Hitchcock Hall.*—This building was completed in 1909, is equipped with a stage, fireproof curtain, three drops, and is protected by the sprinkler system. On the main floor are seats for about 700 and in the gallery for about 300. In a booth in the hall off the gallery is the moving-picture projecting machine. This auditorium is utilized in proper seasons for motion pictures, which are exhibited each week under the auspices of the Red Cross, weekly dances, mental clinics, commencement exercises of the nurses' training school, occasional vaudeville performances, and from time to time lectures to nurses and staff. Occasionally, not more than twice a year, hospital employees are permitted to hold a dance in Hitchcock Hall. Church services and, in case of inclement weather, band concerts are held in the hall.

#### (B) ACTIVITIES UNDER THE JURISDICTION OF THE RED CROSS

Red Cross work at the hospital is in charge of a director, a hostess, a ward visitor, a physical director, and a secretary. A patient is employed and paid for his services as janitor.

The annual budget for Red Cross activities at St. Elizabeths Hospital for the fiscal year ended June 30, 1926, amounted to approximately \$20,000, divided as follows:



Salaries.....	\$10, 440
Comforts, such as cigarettes, pipes, playing cards, tobacco, tooth paste and brushes, matches, fruit, ice cream, candy, suppers, and lunches.....	4, 000
Athletic supplies, such as baseball equipment, tennis equipment, basket balls and uniforms.....	600
Movies, concerts, entertainments.....	1, 500
Dances and other parties.....	1, 500
Red Cross house.....	2, 000

The Red Cross building is open from 7 a. m. until 9 p. m. and includes a living room with a stage at one end, the space being fitted up as a club room, with comfortable chairs, equipment for card and other games, writing materials, books, etc., a room for ladies and offices for the Red Cross officials. The hostess is always present and disturbances are quite unusual.

Once each week the Red Cross takes a group of about 100 ex-service patients to either a basket ball game or to Keith's Theater. Following the entertainment the patients are taken to the Red Cross district headquarters, Jackson Place, for supper, and then they are returned to the hospital.

The director, who has been engaged in his present duties for the past seven years, states that he has observed nothing deserving criticism in the care and treatment of patients and that he believes whenever attendants have been unduly rough in handling patients they have been discharged or otherwise properly punished. He has heard complaints of patients concerning the quality and quantity of food and shortages of milk and sugar, but he has no first-hand information in the premises.

#### (C) ACTIVITIES UNDER THE JURISDICTION OF THE KNIGHTS OF COLUMBUS

On page 23 of the Annual Report of St. Elizabeths Hospital for the fiscal year ended June 30, 1920, appears the following:

*Knights of Columbus Building.*—In connection with the recreational building erected by the Red Cross, they donated the framework of a temporary building which we had transported to the hospital and erected for the use of the Knights of Columbus. In this building the Knights of Columbus give patients the benefit in training in carpentry and other industrial work. Small toys, various classes of implements, and other articles are made at their shop.

The Knights of Columbus call this shop the "toy school" because toys are the bulk of the output. The shop received an average of from 12 to 14 patients a day during the last fiscal year, who were instructed in toy making, the making of small pieces of furniture and general woodworking. The shop is equipped with modern woodworking machines and hand tools. The Knights of Columbus supply all the materials used in the shop. None of the output is sold; it is all given to orphan asylums and charitable institutions. Each Christmas there are from 55 to 60 boxes, containing about 25 toys each, sent to such institutions. In addition to operating this shop the Knights of Columbus do welfare work at St. Elizabeths and have furnished moving-picture films. Films furnished by the Knights of Columbus are shown under the auspices of the Red Cross.

On every week day except Thursday a Knights of Columbus secretary visits the wards wherein are ex-service men and distributes tobacco, cigarettes, candy, tooth brushes, tooth paste, playing cards,

chewing gum, etc. This organization also supplies athletic equipment, such as baseballs, bats, bases, tennis nets, tennis rackets, tennis balls, etc.

Expenditures from July 1, 1925, to June 30, 1926, by the Knights of Columbus, incident to its work at St. Elizabeths aggregated \$13,386.02, divided as follows:

Toy equipment.....	\$375. 11
Working materials.....	501. 40
Salaries for toy school.....	4, 800. 00
Total.....	5, 676. 51
Welfare activities:	
Comforts.....	6, 083. 51
Athletic equipment.....	150. 00
Miscellaneous.....	8. 00
Movie shows (18) since September, 1925.....	180. 00
Salaries, telephone, freight and express.....	1, 288. 00
Total.....	7, 709. 51

The supervisor of the work stated that he had been in close touch with the hospital for about nine years; that his father-in-law had been employed there for some 30 years, and that neither of them had noted ill treatment of patients. He stated that in the few cases of ill treatment of which he had heard the malefactor had been promptly discharged or otherwise punished.

#### (D) ACTIVITIES UNDER THE AUSPICES OF THE JEWISH WELFARE ORGANIZATIONS

This organization maintained headquarters at the hospital during the war, but ceased to do so immediately thereafter. Its present activities seem confined to furnishing one film a month for the Red Cross moving-picture shows, irregular visits and, during the Pass-over, furnishing unleavened bread through the Red Cross to patients desiring it.

#### (E) ACTIVITIES CONDUCTED BY THE WAR MOTHERS

War Mothers, a national organization formed for the purpose of promoting the interests and welfare of veterans of the World War, is still doing a little welfare work at St. Elizabeths Hospital.

#### (F) CANTEEN

About 1890 a store or stall was started by a patient who subsequently committed suicide. In about 1893 a small building was erected by the hospital and a patient named Cutter permitted to run a store therein. Cutter failed, the store was closed for a while, and then, upon request of many patients, the store was reopened, this time conducted by an employe and an exemploye. The employe is a gatekeeper who naturally can not give attention to store duties while at the gate, so it would seem that his store activity in no degree interferes with his official duties. No income accrues to the hospital by reason of the operation of this store, the use of the building being given without rent. The hospital also supplies heat and keeps the building in repair.

The hospital's attitude is: (a) That the canteen is a great convenience and pleasure to a large class of patients who are not permitted to go outside the grounds and otherwise would have no store facilities; (b) that outside stores sell patent medicines, knives, matches, etc., for which reason many patients who are allowed to patronize the canteen would not be allowed to patronize the outside stores.

The hospital specifies what may be carried in stock, so that all merchandise carried is with hospital approval, and there is a stipulation that all merchandise must be sold at prices not greater or less than those charged for similar material on the outside. The gross business averages about \$25,000 a year and it is said that the net profits run to about \$3,200 a year. The permit for the operation of the canteen is revocable at any time.

#### 4. VOCATIONAL ACTIVITIES OF PATIENTS

##### *Male service*

Department	Ward	Type of work
Receiving-----	B 1 and 2-----	General crafts, including weaving, toy making, cord work, knitting, mat making, raffia work and kindergarten construction work.
Detached-----	Dining hall, basement-----	Weaving, woodwork, cocoa doormats, refinishing and repair work; salvage material remade.
West side-----	Retreat 3-----	Weaving.
Howard Hall-----	Garfield basement-----	General wood-shop class.
Do-----	Outside-----	Gardening and cultivating.
Richardson group-----	S. F. B. 4-----	General crafts (see above).
Do-----	S. F. B. 5-----	Do.
Do-----	P building-----	Do.
Trade industrial building-----	Trade industrial shop No. 1-----	Advanced woodwork and repair work.
Do-----	Shop No. 2-----	Toy making, refinishing and repair work.
Do-----	Shop No. 3-----	Weaving.

On June 30, 1926, 249 patients were enrolled in the above classes.

##### *Female service*

Department	Ward	Type of work
Women's-----	C building-----	Plain sewing, crocheting, embroidery, and raffia work.
Do-----	Q building-----	Plain sewing and fancy work.
Do-----	Toner building-----	Plain sewing, shirt making, embroidery, tatting, and knitting.
Do-----	L building-----	Weaving, dressmaking, fancy needle work, plain sewing, and raffia work.

The enrollment in the women's classes on June 30, 1926, was 137.

As success begins to be attained by this method the occupation may vary and become more and more practical and socially valuable. For the patient who does not get well it becomes a problem to industrialize him, not only so that his labor may be used to advantage for the hospital as a whole but so that he may thereby develop habits of life that will be helpful and enable him to live more happily, healthfully, and usefully in the hospital community.

Much of the work done by patients under the direction of seven occupational therapists proves to be of benefit to the hospital. Rugs, towels, scarfs, brushes, brooms, shirts, overalls, dresses, etc., that are made are turned into the storeroom for issue where needed. In

addition to these items chairs, are caned, miscellaneous repair work is done to furniture and fixtures, and some useful and expensive equipment is made in the shops.

Toys, baskets, etc., except those made in the Knights of Columbus toy shop, are disposed of at public sale. The toys made in the Knights of Columbus shop are donated by them to local orphan asylums.

The type of work, the average number of hours worked a day, and the number of patients employed in industrial and economically useful work are set forth in the following schedule:

Place of employment	Number of patients	Daily average hours worked	Type of work being done
Laundry.....	105	6	Ironing, washing, folding, marking, etc.
Kitchens.....	61	5½	Preparing vegetables, dishwashing, floors, etc.
Dining rooms.....	201	5½	Help in serving meals under supervision, set tables, remove dishes, floors, etc.
Farm.....	42	5	Usual farm work and gardening.
Storeroom.....	3	5	Packing and unpacking, cleaning, etc.
Tailor shop.....	22	5	Mending and sewing by hand and machines.
Lawns.....	74	5	Raking, mowing grass, etc.
Mattress shop.....	3	5	Repairing mattresses.
Power house.....	17	5	Ashes and coal.
Shoe and brush shop.....	17	5	Shoes and brushes for hospital use.
Barn.....	13	5	Milking, cleaning, and feeding.
Greenhouse.....	5	5	Flowers and plants.
Upholstery shop.....	2	5	Repairing furniture, laying rugs, etc.
Paint shop.....	7	5	Painting.
Carpenter shop.....	1	5	The usual carpenter work.
Sundry.....	144	5	Errands, trucks, halls, etc.
Piggery.....	9	5	Care of the hogs, feeding, etc.
Wards.....	417	3	Bed making, cleaning, blocking, toilets, etc.

Without the assistance of patients in the performance of the work specified above, it is quite likely that the hospital would find it necessary to employ several hundred additional paid workers.

### 5. RESTRAINT OF PATIENTS

Medicines or other forms of treatment, seclusions, and restraints are administered or applied at the specific direction of the doctors in charge of the various wards. Occasionally, but not frequently, patients become so disturbed, combative, or destructive, that their safety and the safety of others necessitate temporary confinement or seclusion. Such cases are placed in a private room from which all furniture has been removed. Sometimes the rooms used for this purpose are fitted with door latches that will not permit the door to be opened from the inside. In some wards the windows of these rooms are equipped with heavy inside shutters to prevent access by the patient to glass windows, and in the doors are fitted glass peep-holes so that the patient can be observed without aggravating his disturbed condition. Patients in seclusion are visited every 15 minutes. Infrequently wristlets, lined insides with a soft material to prevent chaffing, are applied to patients who in periods of excitement are inclined to do injury to themselves. Occasionally, too, a disturbed patient is tied in bed with sheets.

Mechanical restraints, such as the straight-jacket and the camisole, have been entirely abolished and sedative drugs are used only



in cases of emergency and not as a means of treatment. In place of these methods hydrotherapy is extensively used. It is stated that proper application of hot and cold baths provides a sedative which acts effectively and without befogging the mind of the patient.

The beds used in all wards, except some in Howard Hall proper, are of the regular hospital type. In Howard Hall many of the beds are of heavy wooden construction with two mattresses and no springs. The absence of springs in these wards is due to the fact that sometime ago these patients were discovered to be unwinding bed springs with the parts of which they were fabricating weapons to effect their escape or to commit suicide.

Private rooms generally are reserved for those patients undergoing periods of excitement, but in some wards where conditions will permit such rooms are used for pay patients. In all wards the windows to which patients have access are fitted with heavy wire gratings that deter attempt at elopement or suicide. This is true also of the porches in some wards. The doors in all wards, except those in which all patients have parole, are kept locked so that no patient can enter or leave without the knowledge of attendants or nurses.

All patients not undergoing periods of excitement or who are not on special diet are fed either in general or ward dining rooms, meals being served at 7.30 a. m., 11.30 a. m., and 4.30 p. m. Many of these patients refuse to eat for reasons generally predicated upon hallucinations and sometimes because of complete deterioration. Such cases are tube fed. Those patients who are destructive, untidy, combative, and excited are fed in halls or rooms in the wards. The type of dining-room service and equipment varies with the type of patients to be served. The tidy and convalescent have table linen and acceptable china. Those patients, by reason of their mental deterioration, not capable of appreciating and properly using such facilities are provided with heavy china and unpainted wooden or white porcelain-top tables. Others prone to throw and break china and who can not be trusted with knives and forks are either provided with enameled-ware dishes and spoons or are fed by attendants. The food, menus, and food service are discussed in detail hereafter.

The rules of the hospital unequivocally forbid the abuse of any patient by any employee of the institution, and those employees found guilty of such an offense are generally summarily dismissed from the service. Despite this disciplinary measure the records of the hospital show several cases of mistreatment. One patient, J. P. McCumisky, a white male, was neglected while in restraint. As a result of this neglect the patient suffered with multiple ulcers that were stated to be one of the causes of his death three weeks later. The medical officer guilty of this neglect was reprimanded by the disciplinary board of the hospital. A negro male patient, William Green, was so severely beaten by attendants and nurses in Howard Hall that his death occurred within 24 hours thereafter. The offenders in this case were dismissed, reported to the police, and indicted by the Federal grand jury on a charge of manslaughter. Patient Larey De Grance in an altercation with an attendant received a fractured rib. The records indicate that the offending attendant was discharged. Patient John Osborne, during the course of a bath, being badly administered by an attendant, was

scalded so badly that death resulted the following day. The attendant in this case was exonerated by a coroner's inquest, which found the cause of death to be due to shock following accidental scalding. Patient James Rafferty sustained a fracture of the tibia and fibula of the left leg as a result of being jumped on by an attendant, who was immediately separated from the service. Two attendants found guilty of beating patient John Everton to death with a baseball bat were discharged from the hospital, arrested, and held for the action of the grand jury. Patient Stephen J. McCarthy in an altercation with an attendant, suffered a rupture of the liver and a kidney hemorrhage into the abdominal cavity that caused his death a few hours later. The attendant, according to the records, left immediately following this assault and has not been heard from since. Patients not infrequently injure one another, but the records show no fatal occurrences.

As the mental illnesses subside and improvement is noted observation under less restricted hospitalization is obtained by placing the patients on ground or city parole. Ground parole permits patients to have the freedom of the hospital grounds while city parole enables them to make visits to the city during the daytime. These privileges are extended only pursuant to the concurrence of medical conference, which acts upon the recommendation of the doctor in charge of a particular department. If the conduct of a patient having parole proves satisfactory, he is discharged.

#### (6) OUT-PATIENT DEPARTMENT

A very difficult situation arises in the administration of the hospital with respect to the discharge of recovered, convalescent, and improved patients of the dependent class. One who has been a patient in the hospital, if he remains there for any length of time, loses contact with his former social life and his chances of making a living are very much lessened. In the case of enlisted men they are discharged from the service soon after commitment and upon their recovery find it difficult oftentimes to secure employment. It also frequently happens that relatives do not care to assume the responsibility of their welfare, should they return home. The superintendent of the hospital often hesitates to set at liberty certain patients whose condition seems to have so far improved as to make it useless to keep them longer under treatment for fear that, being thus suddenly thrown upon their own resources without oversight or any visible means of support, they will fall back into the old habits of life which gave rise to their insanity and again become a burden upon society. In order that patients may not be returned to society homeless and without employment the hospital has instituted a social service or out-patient department, which is charged with the duty of finding suitable employment for patients who are about to be discharged and, if possible, arranging for them to have a home. One doctor and two social workers confine their work for the most part to patients living in the District of Columbia.

When patients recover sufficiently and show a desire to visit friends or relatives, or to return to their former homes, they are given permission by the hospital to do so. During these visits the patients are still carried on the hospital rolls and from time to time

are seen by a social worker, who inquires after their welfare and the progress they are making toward social adjustment. At first these visits are short, but from time to time the time is extended if the patient shows a marked progress. If the patient continues to improve and the social adjustment is favorable, such progress is reported to a medical conference, composed of the hospital staff, who recommends that the patient be discharged. If the patient does not show evidence of recovery and the social adjustment is not favorable, he is requested to return to the hospital for further treatment.

Before ex-service men and beneficiaries of the Veterans' Bureau who live outside the District of Columbia are permitted to go on visits to their homes, or to those of friends, their home environments are inquired into, through correspondence, by doctors of the hospital. Permission is given to the patient to visit his family, if they want him or if in the judgment of the hospital staff it is deemed best for the patient to go. The hospital endeavors to have the patient return after a short visit home for a further examination. Then, if it is found that the patient has recovered sufficiently to make the proper social adjustment, he is discharged. Otherwise he is retained in the hospital for further care and treatment.

On October 30, 1926, there were 56 patients not under the social service department on visits with friends and relatives living outside the District of Columbia; also 75 patients under the social service department were away on visits. Of these, 26 were engaged in gainful occupations. Hospital records show that in some instances visits of patients have been extended for periods of several years before they are finally discharged.

#### (7) FACILITIES FOR THE CARE AND TREATMENT OF PATIENTS

The facilities available to the medical division for the care and treatment of patients consist of many buildings of various types of architecture and construction and are divided generally into groups corresponding to the segregation of patients into male, female, and medical and surgical departments and services:

##### (A) MALE SERVICE

The male service is under the direct supervision of a senior medical officer, whose organization rank is that of clinical director. For administrative purposes the buildings and other facilities available to this service are divided into five departments, each of which is under the direct supervision of a medical officer, and in each of which there are one or more contiguous buildings. These departments, the buildings and wards composing them, the patient population, and the personnel employed for their care and treatment are as follows:

1. *Receiving department.*—The average population of this department is approximately 125 patients. These patients are housed in building B, a two story and basement structure of brick and stone which was erected in 1902 at a cost of \$171,000. Building B is of the ell or wing type and is situated on the north side of the administration building to which it is attached by an extended portico. The

north and south wings of the first and second floors are assigned to wards B 1, 2, 3, and 4. The center wing on the first floor provides a dining room that is used by all wards, a reception room for visitors, an office for the supervisor, and a room used by the doctors for the examination of patients. The center wing on the second floor is used for classes taking instruction in the care and treatment of patients at this hospital and for other lectures. The food and pipe tunnels, the douche room containing various hydrotherapy and pack apparatus, and a small gymnasium or exercising room for patients in this department utilize all of the space provided by the basement. The wards in this department are clean, bright, and well ventilated and have facilities, number of patients, and personnel set forth in the following tables:



*Ward facilities, receiving department, male service, June 30, 1926*

Name or designation	Patients		Dormitories		Private rooms			Water sections						
	Number	Color	Area (square feet)	Number of beds	Number	Total area	Total beds	Number	Total area	Number of tubs	Number of sprays or showers	Number of com-modes	Number of urinals	Number of wash basins
B Building:														
B-1-----	31	White-----	1,317	29	8	864	9	4	472	2	1	5	0	5
B-2-----	31	do-----	1,317	31	7	756	7	4	472	2	1	5	0	5
B-3-----	46	do-----	1,317	40	8	864	8	4	472	1	1	5	0	4
B-4-----	33	do-----	1,317	31	8	864	11	4	472	2	1	5	0	5
Total-----	141	-----	5,268	131	33	3,348	35	16	1,888	7	4	20	-----	19

Name or designation	Sitting rooms		Dining rooms			Type of drinking water supply	Area of halls and corridors	Porches		Area used for other purposes	Number of inclosed courts
	Number	Area	Number	Area	Number of chairs			Number	Area		
B Building:											
B-1-----	1	1,847	1	1,628	28	Fountain <sup>1</sup> -----	1,302	1	1,356	1,922	None.
B-2-----	1	1,847	-----	-----	29	do-----	1,302	1	1,356	2,030	None.
B-3-----	1	1,847	-----	-----	29	do-----	1,160	1	1,356	2,064	None.
B-4-----	1	1,847	-----	-----	28	do-----	1,160	1	1,356	2,064	None.
Total-----	4	7,388	11	1,628	114	-----	4,924	4	5,424	<sup>2</sup> 8,080	

<sup>1</sup> All patients use the main dining room.

<sup>2</sup> Area used for other purposes includes space assigned to clothes rooms, linen rooms, employees toilets, etc.

## Patient and personnel report—Receiving department—Male service, as of June 30, 1926

Name or designation	Class of patient	Color	Patient population											Number of employees					
			Capacity		Present				Eloped	Visit- ing	Total on rolls	Em- ploy- ed	Unem- ploy- ed	Morning shift		Afternoon shift		Night shift	
			Normal	Ad- just- ed	Pa- role	Walk- ing at- tended	Not off ward	Total						Psychi- atric nurse	At- tend- ant	Psychi- atric nurse	At- tend- ant	Psychi- atric nurse	At- tend ant
B building: B-1-----	Young men recently ad- mitted—some disturbed and suicidal, other with parole.	White---	32	38	4	9	17	30	1	0	31	13	17	2	4	1	2	1	1
B-2-----	Old men and weak young men recently admitted, some disturbed.	---do----	32	38	7	19	2	28	1	2	31	12	16	2	2	0	3	0	1
B-3-----	Convalescent ward. None disturbed or un- tidy. Most have parole.	---do----	34	40	17	14	2	33	7	6	46	26	7	1	1	0	1	0	1
B-4-----	Disturbed, untidy, com- bative, and assaultive.	---do----	34	40	0	16	7	33	0	0	33	10	23	1	4	0	3	0	2
Total-----	-----	-----	132	156	28	58	28	124	9	8	141	61	53						

<sup>1</sup> Estimated original capacity based on most approved conditions.<sup>2</sup> Based on number of beds on ward.<sup>3</sup> Though eloped and away on visits, patients are carried on rolls.<sup>4</sup> Work done by patients is as follows:

	Patients
Dining room-----	7
Tinner-----	19
Sundry work-----	16
Ward work-----	19
	61

Other employees for department.—Morning shift: 1 supervisor, 1 assistant supervisor, 1 aid (supervisor's office), 1\* bathmaster. Afternoon shift: 1 supervisor, 1 assistant supervisor. Miscellaneous: 1 attendant, Hitchcock Hall, 1 waitress, 3 special attendants.

2. *West side department.*—The west side department provides for the hospitalization of the different types or classes of white male patients and is composed of 22 wards situated in 7 buildings, 5 of which are connected by wings and halls after the Kirkbride Hospital plan and are 3 and 4 stories high, of red brick construction. There are housed in these connected buildings which are not fireproof more than 600 patients who in case of fire would be subject to great fire hazards.

The names of the buildings of this group, in which 17 of the 22 wards are located, are Center Building East, Center Building West, Dawes, and White Ash Buildings. The basement of this center building group is used for food tunnels, air and pipe tunnels, baggage and storage rooms, and kitchen for the superintendent. The first, second, and third floors accommodate 17 wards, one of which is used for the administrative officer's apartment, including a treatment room.

Retreat Building is also of red brick construction, two stories and basement. The basement of this building is also used for storage and tunnels in a similar manner as the center building group. The second and third floors consist of two wards.

Dix Buildings 1, 2, and 3 are all red brick, two stories high with basement similar to the others mentioned. These three buildings are somewhat smaller and accommodate one ward to each building.

Some of these buildings were included in the original construction of the hospital in 1855 and 1858, and while in good state of repair and preservation are without adequate bath and toilet facilities.

The wards are neat and as comfortably furnished as the condition of the patients will permit. Ward facilities, number of patients, and personnel are set forth in following tables:

## Ward facilities, west side department, male service

Name or designation	Patients		Dormitories		Private rooms			Water sections						
	Number	Color	Area (square feet)	Number of beds	Number	Total area (square feet)	Total beds	Number	Total area (square feet)	Number of tubs	Number of sprays or showers	Number of commodes	Number of urinals	Number of wash basins
Center building, west:														
Maple Ward.....	10	White	0	0	10	1,166	10	1	168	1	1	1	0	1
Poplar Ward.....	14	do	190	3	9	996	9	1	168	1	1	1	0	1
Oak Ward.....	26	do	1,071	29	7	840	7	1	198	1	0	2	0	2
Beech Ward.....	38	do	546	40	3	360	3	1	198	1	0	2	0	2
Sycamore Ward.....	47	do	546	49	1	240	1	1	198	1	0	2	0	2
Dix Building: Ward 1.....	34	do	1,782	29	10	720	10	1	308	0	1	2	0	2
Dawes Building: Ward 3.....	63	do	1,300	58	3	412	6	1	416	2	0	2	0	4
Center building, east:														
Cherry Ward.....	10	do	0	0	12	1,224	12	1	176	1	0	2	0	1
Chestnut Ward.....	14	do	0	0	11	1,332	11	1	176	1	1	1	0	1
Cedar Ward.....	10	do	0	0	11	1,332	11	1	176	1	1	1	0	1
Birch Ward.....	44	do	1,849	31	3	324	4	1	236	1	1	2	0	2
Locust Ward.....	42	do	1,368	29	7	756	14	1	236	1	1	2	0	2
Spruce Ward.....	57	do	2,492	42	8	864	15	1	288	1	1	2	0	2
Elm Ward.....	45	do	1,295	37	9	972	18	1	288	1	1	2	0	2
Cypress Ward.....	45	do	1,295	29	9	972	17	1	288	1	1	2	0	2
Retreat building:														
Ward 1.....	47	do	978	26	19	1,330	19	1	240	1	1	2	0	2
Ward 2.....	45	do	978	26	19	1,330	19	1	240	1	1	2	0	2
White Ash Building: Ward.....	39	do	1,658	31	5	450	8	1	250	1	0	2	0	2
Dix Building: Ward 3.....	29	do	888	24	11	693	11	3	295	0	1	4	0	3
Center building, west: West infirmary.....	38	do	2,054	29	6	576	11	1	230	1	0	2	0	3



Name or designation	Sitting rooms		Dining rooms			Types of drinking water supply	Halls and corridors, area (square feet)	Porches		Other purposes, area (square feet)	Remarks
	Number	Area (square feet)	Number	Area (square feet)	Number of chairs			Number	Area (square feet)		
Center building, west:											
Maple Ward.....	1	400	1	294	12	Cooler.....	1,650			602	
Poplar Ward.....	1	400	1	294	14	do.....	1,650			582	
Oak Ward.....	0		1	494	40	do.....	2,264			681	
Beech Ward.....	0		1	494	44	do.....	2,264			222	
Sycamore Ward.....	0		1	494	51	do.....	2,264			352	
Dix Building: Ward 1.....	1	576	1	570	39	do.....	550	1	987	344	
Dawes Building: Ward 3.....	1	380	1	893	64	do.....	1,507			1,852	
Center building, east:											
Cherry Ward.....	1	390	1	216	12	do.....	1,726			598	
Chestnut Ward.....	1	390	1	216	13	do.....	1,726			480	
Cedar Ward.....	1	390	1	216	13	do.....	1,726			480	
Birch Ward.....	0	0	1	340	45	do.....	2,336			369	
Locust Ward.....	0	0	1	340	43	do.....	2,336			418	
Spruce Ward.....	1	141	1	340	45	do.....	2,336			505	
Elm Ward.....	0	0	2	530	45	do.....	1,709			106	
Cypress Ward.....	0	0	2	530	46	do.....	1,709			106	
Retreat building:											
Ward 1.....	1	690	1	600	40	do.....	2,090	1	1,333	666	
Ward 2.....	1	690	1	600	45	do.....	2,090	1	1,333	666	
White Ash Building: Ward.....	0	0	1	300	39	do.....	1,740			246	
Dix Building: Ward 3.....	1	567	2	462	33	do.....	200	2	210	435	Porch inclosed, used as dormitory.
Center building, west: West infirmary..	0	0	1	540	46	do.....	1,527			376	

## Patient and personnel report of the west side department, male service (as of June 30, 1926)

Name or designation	Class of patients	Color	Patient population										Number of employees						
			Capacity		Present				Eloped	Visiting	Total on rolls	Employed	Unemployed	Morning shift		Afternoon shift		Night shift	
			Normal	Adjusted	Parole	Walking attended	Not off ward	Total						Psychiatric nurse	Attendant	Psychiatric nurse	Attendant	Psychiatric nurse	Attendant
Center building, east:																			
Maple ward.....	Officers, paroled and quiet.....	White.....	12	12	7	0	0	7	0	3	10	0	7	1	1	0	1	½	0
Poplar ward.....	Quiet, paroled.....	do.....	10	14	13	0	0	13	0	1	14	5	8	1	1	0	1	0	½
Oak ward.....	Feeble, custodial.....	do.....	25	40	21	0	0	21	2	3	26	21	0	3	2	1	1	0	0
Beech ward.....	Largely convalescent.....	do.....	32	44	3	35	0	38	0	0	38	8	30	0	2	0	1	½	0
Sycamore ward.....	Quiet and chronic.....	do.....	32	51	3	44	0	47	0	0	47	6	41	1	4	0	1	0	½
Dix Building: Ward 1.....	Senile, custodial.....	do.....	25	39	7	27	0	34	0	0	34	4	30	1	1	0	1	0	1
Dawes Building: Ward 2.....	Chronic, workers.....	do.....	46	64	4	59	0	63	0	0	63	53	10	1	1	0	1	0	1
Center building, west:																			
Cherry ward.....	Officers, admission chronic.....	do.....	12	12	2	8	0	10	0	0	10	0	10	1	1	1	1	0	1
Chestnut ward.....	Quiet, paroled, some workers.....	do.....	13	13	5	9	0	14	1	1	16	9	5	1	0	0	1	0	½
Cedar ward.....	Quiet, paroled, chronic.....	do.....	13	13	9	0	0	0	0	4	13	4	5	1	0	0	½	0	½
Birch ward.....	Feeble, paroled, largely chronic.....	do.....	33	45	8	31	5	44	0	0	44	6	38	1	1	0	1	0	1
Locust ward.....	Restless.....	do.....	33	43	10	32	0	42	0	0	42	9	33	1	2	0	1	0	½
Spruce ward.....	Restless and mildly disturbed.....	do.....	45	57	1	56	0	57	0	2	59	15	42	1	2	0	½	0	½
Elm ward.....	Untidy and deteriorated.....	do.....	30	45	1	44	0	45	1	0	46	8	37	1	3	0	2	0	1
Cypress ward.....	Restless and disturbed.....	do.....	30	46	1	44	0	45	0	0	45	11	34	1	2	0	1	0	1
Retreat building:																			
Ward 1.....	Untidy and excited.....	do.....	30	40	0	47	0	0	0	0	47	12	35	1	4	1	1	0	2
Ward 2.....	Excited.....	do.....	30	45	0	45	0	0	0	0	45	12	33	1	4	0	3	0	2
White ash building:	Noisy and untidy.....	do.....	22	39	0	39	0	0	0	0	39	6	33	1	2	0	2	0	1
White ash ward.....																			
Dix Building:																			
Ward 2.....	Officers, paroled, and convalescent.....	do.....	10	10	7	0	1	0	0	0	8	0	8	1	0	0	1	0	½
Ward 3.....	Senile, custodial.....	do.....	22	33	13	16	0	0	0	0	29	4	25	1	1	0	1	0	½
West infirmary.....	Paroled, some convalescent.....	do.....	46	46	38	0	0	0	0	1	39	28	10	1	1	0	1	0	1

Other employees for department.—Morning shift: 2 supervisors, 1 psychiatric aid (treatment room), 1 attendant (printer), 2 barbers. Afternoon shift: 1 assistant supervisor. Night shift: 1 psychiatric aid (supervisor's office).

Number of patients employed: Laundry, 2; kitchens and dining rooms, 33; farm and garden, 7; grounds, 10; bath, 14; storeroom, power house, and shops, 6; occupational class, 27; sundry work, 122.

3. *Richardson department.*—The 622 patients assigned to the Richardson department are housed in buildings designated "N," "P," S. P. B. 2 to 7, inclusive, and tuberculosis cottages 1, 2, and 3. Buildings N and P, which are made of brick and stone, were erected in 1902 at a cost of \$49,662 for the former and \$132,246 for the latter. Building N provides space for one ward, a dining room and douche room. That part of the basement not used to accommodate an electric transformer is used for storage. Building P is a two story and basement structure, providing sufficient space for four wards and two dining rooms. This basement is used as a kitchen, which will be discussed under food and food service. The semipermanent buildings 1 to 7, to which is attached a general kitchen and dining room for this group, were built in 1918 at a cost of approximately \$185,000. Building No. 1 has been assigned to the medical and surgical department. These buildings are of wooden construction with stucco finish and are roofed with a commercial rubber or asphalt roofing material. They were recently overhauled and are at present in a fairly good state of repair. Though considered as separate buildings, these structures are all connected so as to present the appearance of one large building. Together they provide space for seven wards.

The tuberculosis cottages are also of wooden construction with stucco finish. They, however, are detached buildings that were built in 1913 at a cost of approximately \$10,230. Each building provides space for one ward.

All of the buildings in this department provide 15 wards, which have the facilities, number of patients, and personnel indicated by the following tables:

## Ward facilities, Richardson department, male service

Name or designation	Patients		Dormitories		Private rooms		Water sections						Sitting rooms		Dining rooms		Types of drinking water supply	Halls and corridors, area	Porches		Other purposes, area			
	Number	Color	Area	Number of beds	Number	Total area	Total beds	Number	Total area	Number of tubs	Number of sprays or showers	Number of commodes	Number of urinals	Number of wash basins	Number	Area			Number	Area		Number of chairs	Number	Area
Building P:			Sq. ft.			Sq. ft.			Sq. ft.						Sq. ft.		Sq. ft.				Sq. ft.		Sq. ft.	
Ward 1.....	45	White...	1,716	34	10	1,100	16	1	442	0	1	0	0	4	1	1,868	1	1,056	98	Fountain	704	1	1,034	254
Ward 2.....	43	do.....	1,716	36	10	1,100	12	1	442	0	1	3	0	4	1	1,868	9	1,056	95	do.....	704	1	1,034	254
Ward 3.....	39	do.....	1,716	38	10	1,100	9	1	442	0	1	3	0	4	1	1,868	(2)			do.....	704	1	1,034	254
Ward 4.....	48	do.....	1,716	38	10	1,110	10	1	442	0	1	3	0	4	1	1,868	(2)			do.....	704	1	1,034	254
Special dormitory <sup>1</sup>																								
Semipermanent building:																								
Ward 2.....	67	White...	4,600	71	0	0	0	2	557	1	2	7	1	7	1	1,632	(3)			Fountain	272			
Ward 3.....	68	do.....	4,600	71	0	0	0	1	557	1	2	7	1	7	1	1,632	(3)			do.....	272			
Ward 4.....	56	do.....	4,600	71	0	0	0	1	557	1	2	7	1	7	1	1,632	(3)			do.....	272			
Ward 5.....	54	do.....	4,600	72	0	0	0	1	557	1	2	7	1	7	1	1,632	(3)			do.....	272			
Ward 6.....	51	do.....	4,600	72	0	0	0	1	557	1	2	7	1	7	1	1,632	(3)			do.....	272			
Ward 7.....	48	do.....	4,600	72	0	0	0	1	557	1	2	7	1	7	1	1,632	(3)			do.....	272			
Building N, ward	46	do.....	2,100	33	10	880	17	2	308	0	1	4	0	6	2	2,415	1	780	50	Coolers...	981	2	<sup>2</sup> 2,016	1,676
Tubercular cottages:																								
Ward 1.....	18	do.....	1,152	20	0	0	0	1	168	1	0	3	0	2	1	224	1	154	20	Fountain	60	0	0	330
Ward 2.....	19	do.....	1,152	20	0	0	0	1	168	1	0	3	0	2	1	224	1	154	20	do.....	60	0	0	330
Ward 3.....	20	do.....	1,152	20	0	0	0	1	168	1	0	3	0	2	1	224	1	154	20	do.....	60	0	0	330

<sup>1</sup> Not included in total area.<sup>2</sup> Eat in P-1.<sup>3</sup> Eat in P-2.<sup>4</sup> Not being used at present.<sup>5</sup> Patients all eat in general dining room for these buildings.



*Patient and personnel report—Richardson department—Male service*

Name or designation	Class of patients	Color	Patient population											Number of employees						
			Capacity		Present				Eloped	Visiting	Total on rolls	Employed	Unemployed	Morning shift		Afternoon shift		Night shift		
			Normal	Adjusted	Parole	Walking attended	Not off ward	Total						Psychiatric nurse	Attendant	Psychiatric nurse	Attendant	Psychiatric	Attendant	
Building P:																				
Ward 1.....	Untidy and disturbed.....	White.....	24	50	2	41	2	45	0	0	45	12	33	1	3	0	2	0	1	
Ward 2.....	Noisy, combative, and violent.....	do.....	35	48	0	32	10	42	1	0	43	20	23	0	3	0	2	0	1	
Ward 3.....	Chronic custodial.....	do.....	35	47	9	25	0	34	1	4	39	34	0	0	3	0	2	0	1	
Ward 4.....	Noisy, combative, and dangerous.....	do.....	35	48	0	42	6	48	0	0	48	36	12	1	3	0	2	0	1	
Special dormitory <sup>1</sup> .....	Mildly disturbed.....	do.....	8																	
Semipermanent building:																				
Ward 2.....	Senile, feeble, and semihospital.....	do.....	55	71	12	50	5	67	0	0	67	11	56	1	4	1	2	0	2	
Ward 3.....	Custodial.....	do.....	60	71	10	58	0	68	0	0	68	26	42	1	2	0	2	0	1	
Ward 4.....	Chronic custodial.....	do.....	60	71	3	51	0	54	0	2	56	36	18	2	1	0	2	0	1	
Ward 5.....	Untidy; custodial.....	do.....	60	72	4	50	0	54	0	0	54	44	10	1	2	0	2	0	1	
Ward 6.....	Mildly disturbed.....	do.....	55	72	1	48	0	49	2	0	51	29	20	1	2	0	2	0	1	
Ward 7.....	Parole (open ward).....	do.....	60	72	38	0	0	38	2	8	48	18	20	1	1	0	1	0	1	
Building N.....	Paroled and convalescent.....	do.....	40	50	29	13	0	42	1	3	46	30	12	0	0	0	0	0	0	
Tubercular cottage:																				
Ward 1.....	Ambulant and quiet.....	do.....	18	20	2	16	0	18	0	0	18	4	14	1	0	1	0	0	1	
Ward 2.....	Ambulant and bedridden.....	do.....	16	20	4	15	0	19	0	0	19	4	15	1	1	0	1	0	1	
Ward 3.....	Ambulant and mildly disturbed.....	White and colored.....	16	20	2	17	1	20	0	0	20	5	15	0	1	0	1	0	1	

<sup>1</sup> Not used at present.

Other employees for department.—Morning shift: 1 supervisor; 1 assistant supervisor; 4 attendants, dining rooms; 2 attendants, lawns; 3, shops (occupational); 1 bathmaster, 2 barbers; 2 special attendants. Afternoon shift: 1 assistant supervisor. Number of patients employed: Kitchens and dining rooms, 55; farm and garden, 7; grounds, 15; tinner, painter, and carpenter work, 112; sundry work, 120.

4. *Detached department.*—The detached department consists of seven buildings inclosed in an area of approximately 7 acres by a wire fence about 7 feet high. These buildings are of brick and are so situated that they can be and are connected by extended and roofed porches.

Atkins Hall, the oldest building in this group, is a three-story-and-basement structure that was erected in 1878 at a cost of \$31,515. The basement is used for storage purposes and food and pipe tunnels. The wards and a few employees' rooms occupy the second and third floors, and the first floor affords space for a sitting room, reception room, and offices for the supervisor and his assistants.

Relief Building was erected in 1879 at a cost of \$104,863.50. This is a three-story basement and attic structure that provides sufficient space on the upper floors for seven wards. The basement is used for food and pipe tunnels.

In 1883 Home Building was built at a cost of \$71,777.66. This is a four-story building with no basement. The first floor is at ground level and each floor provides sufficient space for one ward.

The Allison Buildings A, B, C, and D were erected in 1899 at a cost of \$82,144. These are two and three story structures. Building A is situated so that the entrance is not within the fenced inclosure for the detached department and is used exclusively for the quarters of two doctors. The first and second floors of buildings B, C, and D afford sufficient space for six wards, and the basements are used for food and pipe tunnels.

Within the fenced area of approximately 7 acres there are seven buildings, six of which are being used almost exclusively for ward purposes and one as quarters for medical officers. While some of the buildings were erected 40 years ago, they appear to be in good a state of repair and are kept in a clean and sanitary condition. The grounds of this inclosure are planted in large and beautiful shade trees and shrubbery and afford ample space for the patients in this department to have plenty of outdoor exercise. Pergolas and benches provide rest and lounging facilities. Available sitting-room space in the buildings is used for beds, leaving only corridors and chairs by each bed for sitting-room purposes. Wards though crowded were clean and well ventilated, though but fairly bright.

The Godding Croft Building, which is also assigned to the detached department, is an old two-story-and-basement structure of brick and wood, the basement of which has been adapted to use as a kitchen, dining room, bath and toilet room, and furnace room. The dining room has space for 12 chairs, the employees being served at one time, the patients at another time.

The first floor is used for a ward for the 11 patients and for quarters for farm employees. The patients' dormitory is small and very crowded. The second floor is apportioned exclusively to employees' quarters and the office of the farm overseer. This building is heated by hot water and illuminated by oil lamps hung by wall brackets.

There are 19 wards in the detached department with facilities, number of patients, and personnel as set forth in the following tables:

Ward facilities, detached department, male service

Name or designation	Patients		Dormito- ries		Private rooms		Water sections					Sitting rooms		Dining rooms		Type of drinking- water supply	Halls and corridors, area (square feet)	Porches		area purposes, (square feet)	Inclosed courts		
	Number	Color	Area (square feet)	Number of beds	Number	Total area (square feet)	Total beds	Number	Total area (square feet)	Number of tubs	Number of sprays or showers	Number of com- modes	Number of wash- basins	Number	Area (square feet)			Number	Area (square feet)			Number of chairs	Number
Godding Croft ward	12	White	468	12	0	0	0	2	166	1	0	2	0	1	375	1	180	12	Well-cooler	216	2	396	-----
Adkins Hall ward	46	do	2,668	44	9	882	9	3	483	2	1	6	9	3	1,852	(2)	-----	-----	1,296	1	720	1,237	
Relief Building:																							
Ward 1	50	do	1,477	36	8	591	14	1	165	0	1	2	3	1	560	(2)	-----	do	649	1	1,397	583	
Ward 2	45	do	1,477	37	8	591	14	1	165	0	1	2	3	1	560	(2)	-----	do	649	0	0	583	
Ward 3	47	do	1,477	37	8	591	14	1	165	0	1	2	3	1	560	(2)	-----	do	649	0	0	583	
Ward 4	52	do	1,477	36	9	654	15	1	165	0	1	2	3	1	560	(2)	-----	do	649	1	473	583	
Ward 5	48	do	1,477	36	9	654	15	1	165	0	1	2	3	1	560	(2)	-----	do	649	0	0	583	
Ward 6	51	do	1,477	38	8	591	13	1	165	0	1	2	3	1	560	(2)	-----	do	649	0	0	583	
Ward 7	33	do	1,035	35	1	0	2	2	0	0	1	3	6	1	720	(2)	-----	do	0	0	0	0	
Home Building:																							
Ward 1	42	do	1,970	39	4	308	4	1	166	1	1	2	3	3	1,200	1	585	42	do	1,869	0	0	0
Ward 2	54	do	1,126	41	13	1,001	13	1	166	0	1	2	3	3	1,200	(2)	-----	do	1,869	2	726	667	
Ward 3	57	do	1,126	45	12	924	12	1	166	0	1	2	3	3	1,200	(2)	-----	do	1,869	0	0	744	
Ward 4	57	do	1,260	32	18	1,386	26	1	166	0	1	2	3	3	1,200	(2)	-----	do	1,869	0	0	148	
Allison B:																							
Ward 1 <sup>1</sup>	9	White and colored.	851	10	0	0	0	1	187	1	0	2	2	-----	-----	1	170	10	do	160	2	1,606	42
Ward 2 <sup>1</sup>	14	White	1,203	16	0	0	0	1	187	1	0	2	2	-----	-----	1	170	7	do	160	1	814	0
Allison C:																							
Ward 1 <sup>1</sup>	22	do	1,565	22	0	0	0	1	210	1	0	2	2	-----	-----	(3)	-----	-----	do	-----	1	660	0
Ward 2 <sup>1</sup>	20	do	1,565	22	0	0	0	1	210	1	0	2	2	-----	-----	(3)	-----	-----	do	-----	1	660	0
Allison D:																							
Ward 1 <sup>1</sup>	51	do	4,459	56	2	288	4	1	200	1	0	2	2	-----	-----	1	320	28	do	376	2	1,245	827
Ward 2 <sup>1</sup>	76	do	4,459	66	4	576	10	2	200	2	6	5	4	-----	-----	1	320	22	do	376	2	1,245	559

<sup>1</sup> No space on these wards that can be set aside for sitting rooms.

<sup>2</sup> Patients eat in main dining room.

<sup>3</sup> All patients eat at bedside tables.

Patients all use ground inclosed by fence.

Patient and personnel report of the detached department, male service, as of June 30, 1926

Name or designation	Class of patients	Color	Capacity		Present population						Em- ployed	Number of employees				
			Nor- mal	Ad- justed	Present		Not off ward	Eloped	Visiting	Total on roll		Morning shift		Afternoon shift		Night shift attendant
					Parole	Walk- ing at- tended						Psychi- atric nurse	Attendant	Psychi- atric nurse	Attendant	
Goddard Croft ward	Paroled, working	White	11	12	11			1		12	11					
Adkins Hall ward	Paroled, quiet and chronic	do	40	49	37			2	4	46	37	1	1			
Relief Building:																
Ward 1	Chronic, deteriorated, epileptic	do	40	50	3	45				50	11	1	1	1		1/4
Ward 2	Deteriorated and chronic	do	40	51	3	42				45	16		2	1		1/4
Ward 3	do	do	40	51	5	42				47	22	1	1	1		1/4
Ward 4	do	do	40	51	1	50		1		52	7	1	1	1		1/4
Ward 5	do	do	40	51	2	46				48	38	1	1	1		1/4
Ward 6	do	do	40	51	2	49				51	40	1	1	1		
Ward 7	Paroled and chronic	do	30	37	24				1	33	24	1		1		
Home Building:																
Ward 1	Paroled, older men, chronic	do	25	42	18					42	18	1	1			
Ward 2	Disturbed combative	do	40	54		54				54	5	1	4	3		2
Ward 3	Chronic, deteriorated	do	40	57	1	51		1		57	17	1	2	1		1
Ward 4	Chronic, destructive	do	40	58		57				57	13	1	2	1		1
Allison B:																
Ward 1	Juvenile defectives	White and colored	8	10	1	8				9	3	1/2	1	1		1/2
Ward 2	Quiet and chronic	White	8	16	4	7				14	7	1/2	1	1		1/2
Allison C:																
Ward 1	Chronic epileptic	do	8	22	2	15				22	2	1/2	1	1/2		1/2
Ward 2	Chronic and deteriorated	do	8	22	1	19				20	2	1/2	1	1/2		1/2
Allison D:																
Ward 1	Very destructive	do	30	60		50	1			51	6	1	2	2		1
Ward 2	Chronic, deteriorated	do	30	76	9	55	8			76	14	2	4	1	1	2

Other employees for department.—Morning shift: 1 supervisor, 1 assistant supervisor. Attendants—Piggery, 2; lawns, 2; tailor shop, 1; laundry, 1; occupational shop, 1; book bindery, 1; barbers, 2. Afternoon shift: assistant supervisor, 1. Night shift: Psychiatry aid, supervisor's office, 1. Number of patients employed: Laundry, 53; kitchens and dining room 36; farms, etc.: Farm and garden, 21; grounds, 20; barn, 2; greenhouse, 5; piggery, 10; storeroom and power house and shops, 41; tinner and carpenter work, 1; occupational class, 14; sundry work, 90.



5. *Howard Hall Department.*—The hospital facilities of the Howard Hall department consist of four buildings, as follows: Howard Hall, Garfield, Dawes, and West Lodge Buildings. These buildings provide space to accommodate the 18 wards for white and colored male patients constituting this department.

The Howard Hall Building, which is used to hospitalize male Federal and District of Columbia prisoners, both white and colored, and also for other patients of the hospital who have homicidal tendencies, consists of two parts, each of which is of the L type with the open ends of the angle coming together and connected by a wall, leaving a paved courtyard in the center. The building is of red brick, two stories and basement, and is used to accommodate eight wards, the basement being on the level with the courtyard, and used for pipe and food tunnels, and a brush and broom factory.

This building was constructed in 1887-1892, at a cost of \$116,448.99, and is equipped with heavy wire and iron guards at the windows and also has similar guards inclosing the iron porches which overlook the inside courtyard. In 1915 a reinforced concrete wall, about 22 feet high with a thickness of 4 feet at base and narrowing to 2 feet 6 inches at top, was constructed around this building at a cost of \$30,454. This wall is about 50 feet from the building at all points and built in the form of a square. This construction renders the building accessible by means of one entrance, which consists of two heavy steel doors that are situated on either side of the gate house. This gate is located at one corner of the outside wall between the wall and the building proper. There is also a truck and fire exit, which is not opened except in cases of necessity. Food is supplied from the general kitchen located outside of the inclosed wall.

Dawes and Garfield Buildings are three and two stories with basement on the ground level providing wards on each floor including the basement. West Lodge is a two story brick building without basement. These buildings are of the old type of construction and are dark and poorly ventilated, and are without proper bath and toilet facilities. The wards appear to be as well kept as conditions will permit. Sitting rooms in many instances consist of long halls which are not in close proximity with the outside light.

It will be seen from the following tables that the wards of this service are very much overcrowded.

Ward facilities Howard Hall department male service

Name or designation	Patients		Dormito- ries		Private rooms		Water sections					Sitting rooms		Dining rooms		Types of drinking water supply	Halls and corridors, area, square feet	Porches		square feet	Inclosed courts					
	Number on rolls	Color	Area, square feet	Number of beds	Number	Total area, square feet	Total beds	Number	Total area, square feet	Number of tubs	Number of sprays or showers	Number of com- modes	Number of urinals	Number of wash- basins	Number			Area, square feet	Number		Area, square feet	Number of chairs	Number	Area, square feet	Other purposes,	Number
Howard Hall Building:																										
Ward 1.....	36	Colored	(1)	(1)	15	990	15	1	480	1	0	3	0	2	1	533	1	922	110	Faucet and cooler	560	1	1,416	117	2	80,764
Ward 2.....	25	do	922	19	15	990	15	1	480	0	1	3	0	2	1	533	(2)	(2)	(2)	do	560	1	1,416	117		
Ward 3.....	22	do	(1)	(1)	15	990	15	1	480	0	1	3	0	2	1	533	(2)	(2)	(2)	do	560	1	1,416	1,039		
Ward 4.....	16	do	(1)	(1)	14	924	14	1	480	1	0	3	0	2	1	533	(2)	(2)	(2)	do	560	1	1,416	1,105		
Ward 5.....	28	White	(3)	(3)	15	990	16	1	480	0	1	3	0	2	1	533	1	922	100	do	560	1	1,416	117		
Ward 6.....	30	do	922	23	15	990	15	1	480	0	1	3	0	2	1	533	(1)	(1)	(1)	do	560	1	1,416	117		
Ward 7.....	24	do	(3)	(3)	15	990	15	1	480	0	1	3	0	2	1	533	(1)	(1)	(1)	do	560	1	1,416	1,039		
Ward 8.....	15	do	(3)	(3)	15	990	15	1	480	0	1	3	0	2	1	533	(1)	(1)	(1)	do	560	1	1,416	1,039		
Gray Ash Building:																										
Ward 1.....	48	Colored	825	5	14	1,260	41	1	250	0	0	3	0	3	0	0	1	300	46	do	1,740	0	0	269	0	0
Garfield Building:																										
Basement ward.....	33	do	0	0	18	1,584	33	1	309	1	0	2	0	3	0	0	1	209	33	do	1,540	0	0	518	0	0
Ward 1.....	28	do	0	0	18	1,584	28	1	309	1	0	2	0	3	0	0	1	209	28	do	1,540	0	0	518		
Ward 2.....	33	do	0	0	18	1,584	33	1	309	1	0	2	0	3	0	0	1	209	33	do	1,540	0	0	518		
Dawes Building:																										
Ward basement.....	56	do	2,355	53	1	180	3	1	416	1	0	2	0	3	1	380	1	725	56	do	1,507	0	0			
Ward basement 1.....	55	do	1,183	24	14	1,456	32	1	416	1	0	2	0	3	1	380	1	635	56	do	1,507					
Ward basement 2.....	55	do	1,183	27	13	1,352	27	1	416	1	0	2	0	3	1	380	1	635	54	do	1,507					
West Lodge:																										
Ward 1.....	51	do	2,430	35	10	720	15	2	302	2	1	3	0	4	0	0	1	216	28	do	843	1	639	758		
Ward 2.....	57	do	2,430	41	10	720	19	1	302	1	1	2	0	3	1	540	1	2,046	88	do	843					
Ward 3.....	68	do	2,430	48	9	648	22	1	303	1	1	2	0	3	1	540	(5)	(5)	(5)	do	843			505		

<sup>1</sup> See ward 2.

<sup>2</sup> Eat with ward 1.

<sup>3</sup> See ward 6.

<sup>4</sup> Eat with ward 5.

<sup>5</sup> Eat with ward 2.

*Patient and personnel report of the Howard Hall department male service as of June 30, 1926*

Name or designation	Class of patients	Color	Capacity		Patient population								Number of employees			
			Normal	Adjusted	Present				Eloped	Visiting	Total on rolls	Employed	Morning shift		Afternoon shift	Night shift
					Parole	Walking attended	Not off ward	Total					Psychiatric nurse	Attendant	Attendant	Attendant
Howard Hall Building:																
Ward 1.....	Receiving criminals...	Colored...	18	16	-----	25	5	36	-----	-----	36	6	1	3	2	1
Ward 2.....	Criminal and homicidal.	do.....	15	29	-----	18	-----	25	-----	-----	25	7	1	2	1	1
Ward 3.....	do.....	do.....	15	23	-----	17	-----	22	-----	-----	22	5	-----	2	1	1
Ward 4.....	do.....	do.....	15	17	-----	12	-----	16	-----	-----	16	4	-----	2	1	1
Ward 5.....	Receiving criminals...	White.....	18	16	-----	10	11	27	1	-----	28	6	1	3	2	1
Ward 6.....	Criminal and homicidal.	do.....	15	28	-----	19	-----	29	1	-----	30	10	-----	2	1	1
Ward 7.....	do.....	do.....	15	27	-----	16	-----	24	-----	-----	24	8	1	1	1	1
Ward 8.....	do.....	do.....	15	16	4	10	3	15	-----	-----	15	2	1	1	1	1
Gray Ash Building, ward 1.	Convalescent and Veterans' Bureau.	Colored...	22	46	4	22	-----	45	2	1	48	23	1	1	1	1
Garfield Building:																
Basement ward.....	Epileptic.....	do.....	25	33	3	23	-----	32	1	-----	33	8	2	1	1	1
Ward 1.....	Custodial.....	do.....	25	23	-----	23	-----	28	-----	-----	28	5	2	1	1	1
Ward 2.....	Dangerous and disturbed.	do.....	25	32	1	17	8	31	1	1	33	6	1	1	1	1
Dawes Building:																
Basement ward.....	Feeble and infirm.....	do.....	48	56	1	50	-----	56	-----	-----	56	4	1	3	2	2
Ward 1.....	Custodial.....	do.....	48	54	5	26	-----	54	1	-----	55	28	-----	2	1	1
Ward 2.....	do.....	do.....	48	54	1	34	-----	54	-----	1	55	20	1	1	1	1
West Lodge Building:																
Ward 1.....	Acute and semihospital.	do.....	32	50	1	12	34	50	-----	1	51	4	2	3	2	2
Ward 2.....	Working.....	do.....	50	57	10	9	-----	55	2	-----	57	46	1	1	1	1
Ward 3.....	do.....	do.....	50	67	13	23	-----	67	-----	1	68	44	1	1	1	1

*Other employees for department.*—Morning shift: 1 supervisor, 1 assistant supervisor, 1 psychiatric aid, supervisor's office, 1 attendant on gate, 1 attendant in workroom, 3 attendants in dining room, 1 attendant in print shop, 1 attendant in power house, 1 attendant on grounds, 1 attendant at incinerator, 1 barber. Afternoon shift: 1 supervisor, 1 attendant on gate. Night shift: 1 psychiatric aid, supervisor's office. Number of patients employed: Laundry, 7; kitchens and dining room, 46; farm and garden, 13; grounds, 41; vineyard, 7; barn, greenhouse, piggery, storeroom, power house, and shops, 32; tinner and carpenter work, 12; occupational class, 5; sundry work, 73.

## (B) FEMALE SERVICE

The female service like the male service is under the direct supervision of a senior medical officer with the organization rank of clinical director. The medical officers attached to this service are usually assigned to the supervision of wards in certain buildings, a preliminary step to an ultimate division of this service into departments should there be an increase in number.

There have been assigned to the female service 12 buildings, all of which, with the exception of the tuberculosis cottages, are constructed of brick and stone.

Toner, the oldest of these buildings, was built in 1889-1891 at a cost of \$57,796. The basement is used as a dining room and for storage purposes. The first and second floors serve as a ward and the third floor is used for vocational training.

Oaks buildings 1 and 2 were erected in 1902 at costs of \$27,665.40 and \$50,042, respectively. The basement of Oaks 1 is being utilized for storage. The basement of Oaks 2, being somewhat larger, serves as a dining room, douche room, and for storage. The first and second floors of Oaks 2 are used exclusively for wards. In Oaks 1 a part of the first floor is used for a dining room and wards occupy the remainder of that floor and all of the second and third floors.

Buildings C, I, J, K, L, M, and Q were all built in 1902 at the following costs:

Building C	\$171,000
Building I	59,473
Building J	60,356
Building K	59,085
Building L	58,241
Building M	48,879
Building Q	130,685

Building C corresponds in design and distribution of space to B building in the male service, and is situated on the south side of the administration building. On the second floor of C building there is a completely equipped operating room in which the hospital performs practically all of its operations.

I, J, K, L, and M buildings are one-story and basement structures, providing sufficient space for one ward with dining room each.

Q building is a two-story and basement structure, the basement of which serves as a kitchen and for storage purposes. The second and third floors provide two wards and one dining room on each.

Tubercular cottages 4 and 5 are wooden structures with stucco finish. These buildings were erected in 1913 at a cost of approximately \$6,820 and are designed to admit a maximum of sunlight and air. Each building accommodates one ward and dining room.

Facilities, number of patients, and personnel of the wards in the female service are set forth in the following tables:



Ward facilities, female department, female service

Name or designation	Patients		Dormito- ries		Private rooms		Water sections						Sitting rooms		Dining rooms		Type of drinking water supply	Halls and corridors, area, square feet	Porches		Other purposes, area, square feet			
	Number	Color	Area, square feet	Number of beds	Number	Total area, square feet	Total beds	Number	Total area, square feet	Number of tubs	Number of sprays or showers	Number of com- modes	Number of urinals	Number of wash basins	Number	Area, square feet			Number	Area, square feet		Number of chairs	Number	Area, square feet.
Building C:																								
Ward 1.....	31	White.....	1,317	26	7	756	10	4	472	2	1	5	0	5	1	1,847	11	1,628	155	Fountain.....	302	1	1,356	402
Ward 2.....	39	do.....	1,317	28	8	864	8	4	472	2	1	5	0	4	1	1,847				do.....	302	1	1,356	294
Ward 3.....	40	do.....	1,317	30	9	972	11	4	472	1	1	5	0	5	1	1,847				do.....	1,160	1	1,356	328
Ward 4.....	43	do.....	1,317	29	9	972	11	4	472	2	1	5	0	5	1	1,847				do.....	1,160	1	1,356	328
Building J, ward.....	65	do.....	3,760	64	11	1,210	22	3	500	0	1	6	0	6	1	4,050	1	850	92	Cooler.....	1,361	3	1,485	2,123
Building K, ward.....	69	do.....	2,410	51	9	990	18	3	342	0	1	5	0	8	1	3,332	1	815	75	do.....	1,380	3	1,935	1,309
Building L, ward.....	43	do.....	1,271	24	17	1,764	23	3	342	0	1	5	0	8	2	3,500	(2)	(2)	(2)	do.....	1,724	3	2,021	2,419
Building M, ward.....	68	do.....	2,075	52	11	1,210	20	3	420	0	1	6	0	6	1	2,499	1	962	76	do.....	978	2	1,920	902
Oakes Building 1:																								
Ward A.....	90	Colored.....	4,560	90	1	88	1	5	542	3	0	5	0	4	2	1,392	1	960	96	do.....	120	0	0	2,474
Ward B.....	126	do.....	3,054	118	13	812	13	3	468	2	0	4	0	2	1	1,660	1	1,436	136	do.....	368			246
Oakes Building 2:																								
Ward D.....	11	do.....	368	12	10	560	10	2	312	1	0	0	0	2	1	788	(3)	(3)	(3)	do.....	292	1	288	216
Ward E.....	34	do.....	0	0	10	560	10	2	312	2	0	2	0	3	1	788	(3)	(3)	(3)	do.....	292			584
Q building:																								
Ward 1.....	64	White.....	1,404	52	10	1,100	10	2	338	0	1	3	0	4	2	2,618	(4)	1,080	95	do.....	688	1	1,033	769
Ward 2.....	58	do.....	1,188	44	10	1,100	15	2	338	0	1	3	0	4	1	2,618				do.....	688	1	1,033	
Ward 3.....	70	Colored.....	1,404	53	10	1,100	16	2	338	0	1	3	0	4	1	2,618				do.....	688	1	1,033	
Ward 4.....	80	do.....	2,160	63	10	1,100	16	2	338	0	1	3	0	4	1	2,618				do.....	688	1	1,033	
Toner Building, ward.....	80	White.....	5,900	62	19	1,197	19	4	1,548	1	1	8	0	8	5	2,148	(5)	(5)	(5)	do.....	410	4	3,040	
I building, ward.....	120	do.....	4,085	112	10	1,100	15	3	499	1	1	6	0	6	2	4,046	1	875	59	Fountain.....	984	3	1,558	2,103
Tubercular cottage 4.....	15	do.....	924	22	0	0	0	2	154	1	0	3	0	2	1	240	1	165	20	do.....	45			411
Tubercular cottage 5.....	16	Colored.....	924	22	0	0	0	2	154	1	0	3	0	1	1	240	1	165	22	do.....	45			411

<sup>1</sup> All patients in C building use one dining room.

<sup>2</sup> Eat in Toner Building.

<sup>3</sup> Eat with ward B.

<sup>4</sup> Eat with Ward No. 1

<sup>5</sup> Eat with ward No. 3.

## Patient and personnel report of the female department female service as of June 30, 1926

Name or designation	Class of patients	Color	Capacity		Patient population						Em- ployed	Unem- ployed	Number of employees					
			Nor- mal	Ad- justed	Parole	Pres- ent: Walk- ing at- tended	Not off ward	Total	Visit- ing	Total on rolls			Morning shift		Afternoon shift		Night shift	
													Psychi- atric nurse	At- tend- ant	Psychi- atric nurse	At- tend- ant	Psychi- atric nurse	At- tend- ant
Building C: Ward 1.....	Custodial and convalescent.	White.....	20	36	4	20	2	26	5	31	24	2	1	1		1	1	1
Ward 2.....	Receiving.....	do.....	20	36		15	24	39	1	40	3	36	2	5	1	2	1	2
Ward 3.....	Convalescent.....	do.....	20	41	1	27	10	38	2	40	10	28		3		1		1
Ward 4.....	Disturbed and convalescent.	do.....	20	40	1	29	13	43	4	47	5	38		4		2		1
Building J.....	Custodial.....	do.....	60	46	3	41	21	65		65	13	52	1	3		1		1
Building K.....	do.....	do.....	40	71	10	45	13	68		68	18	50	1	1		1	1	
Building L.....	Convalescent.....	do.....	35	47	6	24		30	13	43	16	14	1	1		1		1
Building M.....	Custodial.....	do.....	35	71	1	41	26	68	3	71	20	48	1	2	1		1	
Oaks Building 1: Ward A.....	do.....	Colored.....	35	90	1	40	46	87	3	90	27	60	1	3	1	1	1	
Ward B.....	Custodial and untidy.....	do.....	80	124	3	107	16	126	4	130	60	66	1	4	1	2	1	2
Oaks Building 2: Ward D.....	Custodial.....	do.....	10	20		9	2	11	1	12	9	2		1				
Ward E.....	Receiving.....	do.....	10	12		15	19	34	12	46	16	18	1	1	2	1		1
Q Building: Ward 1.....	Disturbed and untidy.....	White.....	35	60	1	40	23	64		64	9	55	1	3	1	1	1	
Ward 2.....	do.....	do.....	35	56		40	18	58	1	59	3	55	1	3	1	2	1	
Ward 3.....	Custodial.....	Colored.....	40	68	3	50	17	70	3	73	22	48	1	2		1	1	
Ward 4.....	Disturbed and untidy.....	do.....	40	76		50	30	80	2	82	19	61	1	2		1		1
Toner Building, ward.	Custodial.....	White.....	40	90	20	60		80	1	81	73	7	1	1		1		1
I Building, ward.	Custodial and infirmary.....	do.....	60	128	7	33	80	115	5	120	13	102	1	6	1	2	1	1
Tuberculosis: Cottage 4.....	Custodial and hospital.....	do.....	20	22	3		12	15			15	2	13	1		1		1
Cottage 5.....	do.....	Colored.....	20	22	1	7	8	16		16	5	11	1	1		1		1

Other employees for department.—Morning shift: 3 supervisors. C. Hydroroom, 1 aid and 1 attendant; laundry, 1 attendant. O. Hydroroom, 1 aid and 1 attendant; relief, 7 attendants. C. Operating room, 1 aid. Afternoon shift: 2 supervisors, 1 aid, 5 attendants. Night shift: 1 aid, supervisor's office; 3 attendants. Miscellaneous: 10 waitresses. Number of patients employed: Laundry, 40; kitchen and dining rooms, 78; sewing rooms, 56; occupational class, 48; sundry work, 145.

## (C) MEDICAL AND SURGICAL SERVICE

There is a medical and surgical service for the care and treatment of patients in need of surgical or medical attention that is conducted similarly to a general hospital. This service is composed of the internal medicine department, which is located in three buildings, a pharmacy, dental department, and dental clinic.

"R" building, which accommodates five of the seven wards of this department, is a modern two-story and basement structure of brick and stone, built in 1902 at a cost of approximately \$115,000. The basement is equipped as a kitchen and storage room, while the first and second floors accommodate the wards.

The isolation building, which is used for patients suffering from contagious diseases, is a one-story and basement structure built of double sheal tile. The basement provides space for tunnels and an incinerator room, the first floor being the available space for one ward. This building was constructed in 1923 at an original cost of about \$28,500.

The semipermanent building No. 1 is a one-story frame and stucco structure of the semipermanent type constructed in 1918 and used as one ward.

The operating room of this department is located in "C" building, which is rather removed from this department and on the Blagden tract, thus necessitating transportation of patients to and from the operating room a distance of approximately one-fourth mile.

The pharmacy and the hospital dental department occupies a part of center building, which building has been previously described, in the west side department.

There is also a dental clinic for Veterans' Bureau patients, which is located in a portable frame building one-story high that was originally donated by the Public Health Service. This building is situated near the center building in the central southeastern part of the Blagden tract.

If the hospital is to properly care for the number of patients now housed therein it is evident that one need is a hospital and surgical building with a sufficient number of wards and beds to accommodate therein the patients requiring special general medical treatment or surgical service.

The following tables give in more detail, the ward facilities, number of patients, and personnel of this service:

## Ward facilities, internal medicine department, male and female service

Name or designation	Patients		Dormitories		Private rooms		Water sections						Sitting rooms		Dining rooms	Type of drinking water supply	Halls and corridors, area (square feet)	Porches		Other purposes, area (square feet)		
	Number	Color	Area (square feet)	Number of beds	Number	Total area (square feet)	Total beds	Number	Total area (square feet)	Number of tubs	Number of sprays or showers	Number of commodes	Number of urinals	Number of wash basins				Number	Area (square feet)		Number	Area (square feet)
R building:																						
Ward R-1-----	14	White-----	1,060	12	6	612	6	2	229	1	1	2	0	3	1	2,202	Trays-----	Cooler-----	640	1	1,132	-----
Ward R-2-----	14	do-----	1,060	12	6	612	6	1	229	1	1	2	0	3	1	2,202	do-----	do-----	640	1	1,132	-----
Ward R-3-----	20	Colored-----	1,060	12	4	408	4	1	229	1	1	2	0	3	1	2,202	do-----	do-----	640	1	1,132	82-----
Ward R-4-----	24	White-----	1,060	12	5	510	5	1	229	1	1	2	0	3	1	2,202	do-----	do-----	640	1	1,132	-----
Ward R-5-----	7	Colored-----	540	10	0	0	0	(1)	(1)	(1)	(1)	-----	-----	0	0	0	do-----	do-----	294	0	0	90-----
Semipermanent building 1-----	65	White-----	4,600	70	0	0	0	2	552	1	1	7	0	6	1	1,632	Trays-----	Fountain----	272	0	0	-----

<sup>1</sup> In common with ward 4.

## Patient and personnel report of the internal medicine department, male and female services, as of June 30, 1926

Name or designation	Class of patients	Color	Capac- ity, ad- justed	Patient population				Em- ployed	Number of employees					
				Walk- ing, at- tended	Not off ward	Visit- ing	Total on rolls		Morning shift		Afternoon shift		Night shift	
									Psychi- atric nurse	Attend- ant	Psychi- atric nurse	Attend- ant	Psychi- atric nurse	Attend- ant
R building:														
Ward L-1	Disturbed and untidy	White	33		13		14	3	1		1	1	1	1
Ward L-2	Disturbed and undisturbed	do	36		14		14		1	2	2	2	1	1
Ward L-3	do	Colored	36		14	4	20	7	1	3		2		2
Ward L-4	do	White	36		23		24		1	4	1	1	1	1
Ward L-5	do	Colored	10		7		7		1			1		1
Isolation building			51											
Semipermanent building 1	Disturbed and untidy	White	71	46	7		56		1	6		3		3

Other employees for department.—Morning shift: 1 head nurse, office; 1 psychiatric nurse, office; 1 head nurse, dressing room; 1 student nurse, dressing room; 1 psychiatric nurse, violet-ray room. Afternoon shift: 1 head nurse, office. Number of others employed: Kitchens and dining rooms, 6; sundry work, 4.



## (D) LABORATORY

The facilities for laboratory work are provided for in a building known as the Blackburn Laboratory, and affording about 21,000 square feet of floor space. This is a two story and basement structure, of red brick and stone, constructed in 1923 at an approximate cost of \$100,000, which still remains unfinished as the inside walls and partitions with few exceptions are not plastered, and floors and stairways are plain concrete. The basement, which for the most part is at ground level, is equipped and used for storage, autopsy and classroom, with connecting morgue.

The first and second floors are used for photography, X-ray rooms, laboratories, the department of chemistry, specimen rooms, class rooms, treatment rooms, general workrooms, refrigerators for specimens, incubator for microbes, incinerators, office, and record rooms, with much technical medical equipment. The first floor also provides for patients a waiting room with bare brick walls and plain wooden benches.

All autopsies, specimen tests, electrical and X-ray treatments, as well as other laboratory work, are performed in this building. There are classes in anatomy, physiology, pathology, and neurology, for nurses, internes, attendants and also for students of some of the medical schools of the District of Columbia.

There is also another building known as the Pathological Laboratory, which is situated on the Blagden tract. This is a two story and basement, red brick structure built in 1884, at a cost of \$9,509.19, and provides 2,250 square feet of floor space. The basement is used for storage purposes, but owing to the need of repairs, no other part of this building is in use, the pathological activities being provided for in the Blackburn Laboratory Building.

The laboratory is under the direct supervision of a senior medical officer who is assisted by two medical officers, one senior medical technician, two junior medical technicians, one assistant photographer, one psychiatric nurse, one senior laborer and one minor domestic attendant.

## (E) MEDICAL LIBRARY

The medical library, which is located in the north wing of "A" or otherwise known as Administration Building, is under the general charge of the librarian who has one assistant. The library consists of some 5,000 scientific and technical books, pamphlets and periodicals, with card catalogues, for further reference to allied subjects in the Congressional Library, and the Surgeon General's Library at Washington, D. C.

## (F) MORGUE

The Hospital Morgue is located in Blackburn Laboratory adjacent to the autopsy room and is provided with 15 separate sections equipped with refrigeration. Bodies of deceased patients are kept in the morgue until claimed by relatives. If the body is not claimed burial is provided for in the Hospital cemetery or the body is turned over to the Anatomical Board of the District of Columbia for disposition.

## VII. ADMINISTRATION OF PERSONNEL

## (1) EMPLOYMENT OF PERSONNEL

While St. Elizabeths Hospital has always been under the jurisdiction of the Department of the Interior, the act of March 3, 1855 (10 Stat. 682), vested authority in the superintendent "subject to the approval of the visitors, (to) engage and discharge all needful and usual employees in the care of the insane, and all laborers on the farm, and determine their wages and duties."

From the time the hospital was organized until the employees of the institution were placed under civil service by Executive order of May 6, 1896, officers and employees were selected by the superintendent subject to the approval of the board of visitors. Since that time vacancies in positions, except that of superintendent, have been filled either by selection from civil service registers of eligibles or by authority of the Civil Service Commission to appoint outside the register.

Many difficulties have been encountered and overcome before the present system was evolved. One of the greatest difficulties has been the securing of competent lower-grade employees, such as attendants, laborers, waitresses and kitchen help. Many different methods were tried out and finally the whole St. Elizabeths service was placed by the Civil Service Commission under the secretary of the fourth civil service district and a local civil service board created under the direction of a local representative to take care of all-minor grade positions.

Even after hospital employees were placed under civil service by the Executive order of May 6, 1896, there were practically no requirements for the positions of attendants and other minor positions except physical condition and age. Applications for these positions were filed with the representative of the Civil Service Commission at the hospital, who assigned a rating and made a monthly report to the United States Civil Service Commission of the number of applications received, accepted, rejected, appointed, etc. This rating was merely perfunctory, as overyone who met the physical and age requirements was assigned a rating. A grade assigned did not matter materially, as the demand practically always exceeded the supply.

Under date of May 2, 1917, the commission approved a recommendation that the third-grade examination be given for attendants and a special form of announcement was prepared for the examination. In this examination there was a physical requirement together with a mental test. It was found that with this requirement and the conditions existing during the war there were even fewer eligibles than those secured under the former method. In the early days of the institution, before and after the employment of the attendants was taken over by the Civil Service Commission, the large yearly turnover for this class of employees was chiefly due to two facts:

(a) The extremely low salaries—\$20 a month and subsistence for men and \$15 a month and subsistence for women and

(b) The low grade of employees obtained.

Within the last few years all vacancies below the office of Superintendent of the hospital have been and are now filled in accordance with the following procedure under civil service laws, rules, and regulations. There are two general methods of securing eligibles from which vacancies are filled:

(a) Through appointment of eligibles secured by competitive examinations conducted by the local civil service board, and

(b) Through certification of eligibles through the office of the secretary of the fourth civil service district.

The minor grade positions are filled through competitive examination held by the local board, which has its office in the administrative building of the hospital.

Examinations for the following positions are held by this local board: Assistant cook, cook, farm hand, fireman laborer (kitchen fireman), kitchen attendant, kitchen helper, laundry worker (female), milkman, poultryman, seamstress, waitress, attendant, student nurses, psychiatric nurse, charge psychiatric nurse, nurse, assistant supervisor, head nurse, supervisor.

When eligibles are needed announcements are published. Applications are then accepted. Usually there is a day set for closing the receipt of these applications. Soon thereafter the United States Civil Service Commission sends an examiner to the hospital who, together with the local civil service secretary (who at this time is the personnel officer of the hospital), goes over these applications and assigns to them a rating. The eligible register is then made up in duplicate from those who pass with an average of more than 70 per cent, the secretary of the fourth civil service district keeping one set and the local board at the hospital the other. Selections are made from these eligibles by the local representative and reported to the commission, who makes the necessary checks to see that proper selections are made.

For the higher grade positions it is necessary to secure eligibles direct from the secretary of the fourth civil service district. These include all positions not included in the above-mentioned list of positions. There are, however, two excepted positions: Schedule A, section 13, provides for "one confidential clerk and one record clerk to the superintendent of St. Elizabeths Hospital." The position as confidential clerk is now filled by Mr. Arnold W. Barbour, who has a civil service status and was civil service representative for a number of years prior to his appointment as confidential clerk. The excepted position of record clerk has not been filled for many years.

Following is a chart of the personnel of this hospital for the 10-year period ended June 30, 1926. For purposes of uniformity the class specifications and task names are those assigned by the personnel classification board. While the salary range conforms to the classification act of 1923 "A" in the headings of columns indicates additions, "S" separations. Promotions and reductions are not indicated with the result that separations from certain positions may be shown where no appointments thereto have been made.

Comparative table of hospital personnel, July 1, 1916, and June 30, 1926, including additions and separations

Designation	Classification grade	Force, July 1, 1916	Salary, July 1, 1916	Force, June 30, 1926	Salary range since July 1, 1924
Chief medical officer.....	Professional, 6-6.....	1	\$5,000	1	\$6,000-\$7,500
Senior medical officer.....	Professional, 5-6.....	2	2,000	6	5,200-6,000
Medical officer.....	Professional, 4-6.....	4	1,600-2,000	12	3,800-5,000
Associate medical officer.....	Professional, 3-6.....	8	1,200-1,500	6	3,000-3,600
Assistant medical officer.....	Professional, 2-6.....	3	1,000-1,200	6	2,400-3,000
Junior medical officer.....	Professional, 1-6.....	1	900	9	1,860-2,400
Associate dentist.....	Professional, 3-5.....	3		3	3,000-3,600
Assistant dentist.....	Professional, 2-5.....	1		1	2,400-3,000
Junior dentist.....	Professional, 1-5.....	1	600	0	1,860-2,400
Visiting dentist (not classified).....		1		1	1,860-2,400
Senior dental hygienist.....	Subprofessional, 1-15.....	1		1	1,500-1,860
Dental hygienist.....	Subprofessional, 3-15.....	1		1	1,320-1,680
Optomologist (not classified).....		1		1	1,320-1,680
Senior pharmacist.....	Subprofessional, 6-20.....	1		1	1,860-2,400
Assistant pharmacist.....	Subprofessional, 4-20.....	1	950	1	1,140-1,500
Senior medical technician.....	Subprofessional, 6-16.....	1		0	1,860-2,400
Medical technician.....	Subprofessional, 5-16.....	1		1	1,680-2,040
Assistant medical technician.....	Subprofessional, 4-16.....	1		1	1,500-1,860
Junior medical technician.....	Subprofessional, 3-16.....	1	300	2	1,320-1,680
Assistant photographer.....	Clerical, administrative, and fiscal, 3-14.....	1	600	1	1,500-1,860
Underlaboratory apprentice.....	Subprofessional, 2-1.....	1		1	1,140-1,500
Superintendent of nurses.....	Subprofessional, 3-22.....	1	1,200	3	2,400-3,000
Assistant chief nurse.....	Subprofessional, 6-22.....	1		6	1,860-2,400
Head nurse.....	Subprofessional, 5-22.....	1		83	1,680-2,040
Psychiatric nurse.....	Subprofessional, 4-17.....	77	330-570	0	1,500-1,860
Nurse.....	Subprofessional, 4-22.....	12	330-480	2	1,500-1,860
Junior psychiatric nurse.....	Subprofessional, 3-17.....	17		55	1,320-1,680
Student nurses (not classified).....		1		17	288
Chief dietitian.....	Subprofessional, 7-21.....	1		1	2,100-2,700
Head dietitian.....	Subprofessional, 5-21.....	1		6	1,680-2,040
Dietitian.....	Subprofessional, 4-21.....	1		0	1,500-1,860
Chief engineering aid.....	Subprofessional, 8-13.....	1	1,200	1	2,400-3,000
Principal scientific aid.....	Subprofessional, 7-2.....	1		1	2,100-2,700
Chief occupational therapy aid.....	Subprofessional, 7-10.....	1		1	2,100-2,700
Assistant chief occupational therapy aid.....	Subprofessional, 6-19.....	1		1	1,860-2,400
Physiotherapy aid.....	Subprofessional, 4-13.....	1	540	4	1,500-1,860
Occupational therapy aid.....	Subprofessional, 4-19.....	15		2	1,500-1,860
Principal social service worker.....	Subprofessional, 7-5.....	2		2	2,100-2,700
Assistant social service worker.....	Subprofessional, 4-5.....	0		0	1,500-1,860
Hospital supervisors.....	Subprofessional, 5-23.....	14	570-810	20	1,680-2,040
Hospital attendants.....	Subprofessional, 2-14.....	254	180-540	493	1,140-1,500
Industrial supervisor.....	Subprofessional, 7-24.....	1		1	2,100-2,700
Training assistant.....	Subprofessional, 6-24.....	4		4	1,860-2,400



Principal library assistant.....	Subprofessional, 7-25.....	1	600	1	2, 100- 2, 700
Assistant chief guard.....	Custodial, 7-4.....	1		1	1, 680- 2, 040
Head guard.....	Custodial, 6-4.....	1		1	1, 500- 1, 860
Senior guard.....	Custodial, 4-4.....	5	300- 720	8	1, 140- 1, 500
Guard.....	Custodial, 3-4.....			0	1, 020- 1, 260
Associate engineer.....	Professional, 3-8.....	2	1, 800	2	3, 000- 3, 600
Assistant mechanical superintendent.....	Custodial, 9-3.....	1		1	2, 100- 2, 700
Principal mechanic.....	Custodial, 8-3.....	2	1, 100- 1, 200	2	1, 860- 2, 400
Senior mechanic.....	Custodial, 7-3.....	9	720- 900 3 4. 00	15	1, 680- 2, 040
Mechanic.....	Custodial, 6-3.....	47	600- 1, 200 3 2. 25- 5. 00	46	1, 500- 1, 860
Junior mechanic.....	Custodial, 5-3.....	18	540- 720	21	1, 320- 1, 680
Undermechanic.....	Custodial, 4-3.....	23	300- 900	22	1, 140- 1, 500
Minor mechanic.....	Custodial, 3-3.....	11	144- 600 3 1. 00- 2. 50	25	1, 120- 1, 260
General foreman of laborers.....	Custodial, 6-2.....	1		1	1, 500- 1, 860
Foreman of laborers.....	Custodial, 5-2.....	3	360- 480	2	1, 320- 1, 680
Assistant foreman of laborers.....	Custodial, 4-2.....	5	360- 540 3 3. 25	8	1, 140- 1, 500
Senior laborers.....	Custodial, 3-2.....	52	240- 540	58	1, 020- 1, 260
Junior laborers.....	Custodial, 2-2.....	24	120- 580 3 1. 50- 1. 60	36	900- 1, 140
Chief supervisor, domestic attendants.....	Custodial, 9-5.....	1	1, 200	1	2, 100- 2, 700
Principal supervisor, domestic attendants.....	Custodial, 8-5.....	1	1, 200	1	1, 860- 2, 400
Senior supervisor, domestic attendants.....	Custodial, 7-5.....	2	780- 900	3	1, 680- 2, 040
Supervisor, domestic attendants.....	Custodial, 6-5.....	2	600- 720	3	1, 500- 1, 860
Senior domestic attendants.....	Custodial, 5-5.....	21	300- 570	23	1, 320- 1, 680
Junior domestic attendants.....	Custodial, 4-5.....	11	300- 420	10	1, 140- 1, 500
Underdomestic attendants.....	Custodial, 3-5.....	36	144- 360	48	1, 020- 1, 260
Minor domestic attendants.....	Custodial, 2-5.....	112	120- 240	104	900- 1, 140
Assistant scientist.....	Professions, 2-4.....	1		1	2, 400- 3, 000
Farm steward.....	Custodian, 8-2.....	2	720- 1, 200	0	1, 860- 2, 400
Foreman gardener.....	Subprofessional, 5-4.....	1	900	1	1, 680- 2, 040
Head gardener.....	Subprofessional, 4-4.....	1	600	1	1, 500- 1, 860
Gardener.....	Subprofessional, 3-4.....	1	700	1	1, 320- 1, 680
Assistant gardener.....	Subprofessional, 2-4.....	2	480- 600	2	1, 140- 1, 500
Veterinarian (not classified).....		1		1	1, 500
Senior administrative officer.....	Clerical, administrative, and fiscal, 12-2.....	1	2, 500	1	5, 200- 6, 000
Administrative assistant.....	Clerical, administrative, and fiscal, 8-2.....			1	2, 700- 3, 300
Junior administrative assistant.....	Clerical, administrative, and fiscal, 7-2.....	4	1, 200- 1, 500	4	2, 400- 3, 000
Principal clerk.....	Clerical, administrative, and fiscal, 6-1.....			1	2, 100- 2, 700
Senior clerk.....	Clerical, administrative, and fiscal, 5-1.....			1	1, 860- 2, 400
Clerk.....	Clerical, administrative, and fiscal, 4-1.....	1	1, 200	3	1, 680- 2, 040
Assistant clerk.....	Clerical, administrative, and fiscal, 3-1.....	5	720- 1, 000	6	1, 500- 1, 860
Junior clerk.....	Clerical, administrative, and fiscal, 2-1.....	2	540- 720	6	1, 320- 1, 680
Underclerk.....	Clerical, administrative, and fiscal, 1-1.....	2	720- 840	2	1, 140- 1, 500
Head stenographer.....	Clerical, administrative, and fiscal, 5-4.....			1	1, 860- 2, 400
Senior clerk-stenographer.....	Clerical, administrative, and fiscal, 5-6.....			1	1, 860- 2, 400
Senior stenographer.....	Clerical, administrative, and fiscal, 3-4.....	3	600- 720	13	1, 500- 1, 860

<sup>1</sup> Per visit.<sup>2</sup> And maintenance.<sup>3</sup> Per day.



Dietitian							5	3	3	5				3				1			
Principal scientific aid																					1
Chief occupational therapy aid							1		1	1											1
Physiotherapy aid							19	7						1	1		1		1		1
Occupational therapy aid										9	13	13	11		4	5	11	1	7		4
Principal social service worker																1					
Assistant social service worker							1							2		3	2			1	2
Hospital supervisors				1		2		1		3	1	1									
Hospital attendants	245	217	138	226	272	183	731	427	439	433	246	218	243	205			234	221	201	186	253
Industrial supervisor									1												247
Training assistant																	15	3		1	3
Principal library assistant		1																1			
Head guard									1									4			
Senior guard		2					2		1	2	1	2			2						1
Guard																					
Associate engineer		1			2	2															
Assistant mechanical superintendent																					
Principal mechanic										1									1	1	1
Senior mechanic	1	1	6	5	2	2			1		1			1	3	1	1		1	1	3
Mechanic	8	7	7	10	9	8	9	6	5	8	6	4	8	10	9	11	5	6	1	7	4
Junior mechanic	1	3	2	8	8	2	1	1	1	2								3	3	1	3
Undermechanic	5	7	17	12	38	36	6	4	4	4	7	4	9	9	6	5	2	4	7	5	5
Minor mechanic	3	3	6	6	3	6	3		13	6	12	10	7	6	6	2	2	2	1	1	1
General foreman of laborers						1	1														
Foreman of laborers										1				1						1	1
Assistant foreman of laborers				1										1	1	1	2	3		1	1
Senior laborers	47	51	29	37	72	63	41	41	34	34	9	7	12	14	10	11	15	11	27	23	7
Junior laborers	8	9	24	35	33	24	16	10	19	14	12	5	22	17	7	14	16	17	6		
Chief supervisor, domestic attendants																					
Principal supervisor, domestic attendants																					
Senior supervisor, domestic attendants																					
Supervisor, domestic attendants				1	1		1	1			2	1									
Senior domestic attendants	1	2																			
Junior domestic attendants	3	6	1	5	8	9	9	5	1	1	4	5	2	7	2	1		1	1	1	1
Underdomestic attendants		2		5	4	5	1	1		3	1	2				1		1	1	1	
Minor domestic attendants		4	6	12	16	17	14	13	9	10	6	2	4	8	3	4	2	1	5	5	10
Assistant scientist	80	75	77	100	139	107	117	99	96	88	88	72	55	47	53	34	16	35	11	1	1
Farm steward															1				1		
Assistant gardener											1		1	1							
Administrative assistant							2	2													
Junior administrative assistant																			1	1	
Principal clerk			1		1	1	1	1													
Senior clerk									1				1	1						1	
Clerk																					
Assistant clerk		1	1	3	5	2	7	5	2	2	4	3	1	1	2		2	2	2	2	1

Comparative table of hospital personnel, July 1, 1916, and June 30, 1926, including additions and separations—Continued

Designation	1917		1918		1919		1920		1921		1922		1923		1924		1925		1926	
	Additions	Separations	Additions	Separations	Additions	Separations	Additions	Separations	Additions	Separations	Additions	Separations	Additions	Separations	Additions	Separations	Additions	Separations	Additions	Separations
Junior clerk													1		2		2	3	3	
Underclerk		1	1	2	1	2	1	1									1	1	1	
Senior stenographer	6	1	4	5	2	2	10	5	3	1	4	4	6	3	2		1	1	1	2
Assistant clerk-stenographer							1		1	1										
Junior stenographer																	2	1		1
Junior clerk-stenographer																			1	
Junior clerk-typist															3	1			6	3
Underclerk-typist									1										1	
Junior operator, office devices					2	1	1	2			1	1								
Underoperator, office devices		1															1	1		
Assistant messenger																			1	
Total	426	439	332	<sup>4</sup> 526	631	513	1,055	658	694	669	459	408	411	386	446	414	339	361	419	386

<sup>4</sup> Includes 1 ophthalmologist and 1 visiting ophthalmologist (not classified).



## (2) THE DISCIPLINE AND DISCHARGE OF PERSONNEL

Employees are separated from the service by transfers to other departments, deaths, retirements, resignations, and dismissals.

Prior to placing employees of the hospital under civil service the superintendent, with the approval of the board of visitors, had full power to discharge any and all employees. After the inclusion of these employees under civil-service authority, in order to dismiss or remove an employee it was necessary to comply with the provisions contained in section 6 of the act of August 24, 1912 (37 Stat. 555), which provides that "no person in the classified civil service of the United States shall be removed therefrom except for such cause as will promote the efficiency of said service and for reasons given in writing, and the person whose removal is sought shall have notice of the same and of any charges preferred against him, and be furnished with a copy thereof," etc.

Up to January 1, 1922, recommendations for dismissals or removals were made by the employees' superior officer direct to the superintendent of the hospital. A disciplinary board of physicians was then established by the superintendent to handle infractions of the rules of the medical division and to make recommendations to the superintendent. This board usually consists of the first assistant physician, who acts as chairman of the board and selects the other members, a clinical director, and a medical officer, other than supervisors of subordinates who may be brought before it. The board meets every Thursday in the administration building to hear any cases to come before it.

In case a charge nurse, charge attendant, or chief of one of the various hospital activities reports an employee to the supervisor for an alleged infraction of rules, the supervisor reports the matter to the physician in charge of his ward or service, who in turn notifies the superintendent of the hospital. A letter is written to the employee by the superintendent stating that charges have been brought against him and directing him to file a written answer to the charges and appear before the disciplinary board, where the charges against him will be heard and he may present any defense in his behalf. All evidence in the case is heard and the board makes its recommendation in the matter to the superintendent, who writes a letter to the employee stating the action taken in his case and setting forth the punitive measures decided upon. If the charges warrant, the employee is suspended without pay from the time charges are preferred against him until action has been taken by the board. Several employees who have been so suspended and found not guilty by the board have protested the loss of salary for the period suspended and have asked that they be paid their salary for such time. Employees are informed that payment of salary under such circumstances is not in accordance with decisions of the Comptroller General covering such cases.

The punishment meted out in cases of minor infractions of the rules usually consists of a reprimand and a warning that a recurrence will bring more drastic action. The next step is to deprive employees of half days, Sundays, and holidays off duty. In cases of more serious infractions of the rules employees are suspended without pay

for a number of days. Those who are guilty of a major infraction of the rules are usually dismissed from the service.

While the superintendent usually follows the course outlined by the board, he is in no way bound by their action. Very frequently an employee who has been recommended by the board for dismissal and who is not temperamentally fit to perform the duties of an attendant has been used to advantage on the farm, in the dairy, or in some other activity of the hospital.

Again, an employee may have been guilty of several infractions of the rules and yet retained on the rolls, while other employees guilty of a lesser number of infractions of the same rules have been dismissed.

A number of employees have been found asleep on duty on more than one occasion and were not dismissed because the records of these employees were otherwise satisfactory or there were no eligibles at that time from which selection could be made, making it necessary to retain them or run the hospital with fewer employees. Sometimes an attendant has been charged with abuse of patients, but the circumstances were such as to make it impossible to be sure whether the patient was abused by the employee or the patients were trying to frame the employee, of which there have been a number of cases. In all cases where it has been clearly shown that the patient was abused the employee has been disciplined.

Before the reclassification law went into effect, instead of suspending employees without pay for a certain period of time, they were demoted usually \$2.50 or \$5 a month for a number of months, and if an improvement was noted in their work at the end of that time they were restored to their former salary. Under the reclassification act the hospital has no authority to reduce the salary of employees as formerly, the method of suspending employees without pay being substituted.

Infraction of rules by employees coming under the administration division does not come before the disciplinary board, but it handled by the superintendent through recommendation of the administrative assistant, who has charge of those activities other than medical.

Following is a statement showing the number of transfers, deaths, retirements, resignations, and dismissals for each year during the 10-year period covered in this report:

Period	Dismissals	Resignations	Retired	Deceased	Transferred to other Government departments	Total
Fiscal year:						
1917.....	216	216	0	5	2	439
1918.....	322	200	0	3	1	526
1919.....	318	184	0	10	1	513
1920.....	282	369	0	7	0	658
1921.....	327	327	9	6	0	669
1922.....	174	223	5	6	0	408
1923.....	156	209	10	10	1	386
1924.....	158	239	10	5	2	414
1925.....	115	222	17	6	1	361
1926.....	184	188	6	7	1	386
Total.....	2,252	2,377	57	65	9	4,700

The more pronounced causes of removals for the fiscal years 1917 to 1926 are indicated below:

Cause of dismissal	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926
Absent without leave <sup>1</sup>	134					68	72	69	58	70
Appropriating clothing and property belonging to others	1						1	1	1	2
Asleep on duty	2					14	9	7	2	21
Being off ward during working hours without permission	2						1			
Borrowing money from colored patient										1
Conduct unbecoming an employee	6					4				
Dismissed at request of Civil Service Commission for impersonating brother at examination								1		
Dismissed during probation (services unsatisfactory)						7	1	4	10	12
Dropped from rolls at end of harvesting season	2									
Fighting with other employees						1				
Gambling and playing cards while on duty						7				
Gave money to patient to elope	1									
Implication in criminal offense						1				
Insubordination	11					5	3	3	1	3
Intoxicated or bringing intoxicating liquors on hospital reservation	8					7	8	6	5	6
Making false statements in civil-service record										1
Mailing letters secretly for patients										1
Negligence of duties						1	3	1		1
Permitting patients to elope	1					3				
Permitting patient to remove surgical dressing from incision										2
Physically unfit						1				
Removed in reduction of force									3	
Resigned without giving the required notice	39					36	31	32	12	39
Services no longer required (patient died) <sup>2</sup>	3									
Services unsatisfactory; no specific charge	1					4	8	13	2	8
Stealing or attempting to steal hospital property							3	2	3	
Student nurse not adapted for work										1
Using unnecessary force, abuse and threatening patients <sup>3</sup>	5					15	16	19	18	13
Total	216	322	318	282	327	174	156	158	115	181

<sup>1</sup> The following dismissals are classified as "absent without leave": Employees leaving the service without any advance notice; employees failing to return to duty for a considerable period of time; employees failing to return to duty on a certain day after being told to do so.

<sup>2</sup> Special attendants hired to take care of wealthy patient; salaries and expenses paid by mother's estate; dropped from rolls after patient died.

<sup>3</sup> One employee in fiscal year 1922 discharged for abuse to patient was later allowed to resign at request of the Secretary of the Interior.

The number of dismissals during the 10-year period listed according to positions is set forth below:

Name of position	Classification grade	Present salary range	Fiscal years—									
			1917	1918	1919	1920	1921	1922	1923	1924	1925	1926
Junior medical officer.....	P. 1-6.....	\$1,860-\$2,400	---	---	1	---	---	---	1	2	---	1
Assistant medical technician.....	S. P. 4-16.....	1,500-1,860	---	---	---	---	---	---	---	---	---	---
Psychiatric nurse.....	S. P. 4-17.....	1,500-1,860	10	16	12	1	2	2	---	3	3	---
Junior psychiatric nurse.....	S. P. 3-17.....	1,320-1,680	---	---	---	1	1	1	---	1	1	---
Student nurses (not classified).....	---	288	---	---	---	---	---	---	---	---	---	3
Occupational therapy aid.....	S. P. 4-19.....	1,500-1,860	---	---	---	---	1	---	---	---	---	---
Hospital attendants.....	S. P. 2-14.....	1,140-1,500	133	141	125	195	233	114	104	108	83	146
Training assistant.....	S. P. 6-24.....	1,860-2,400	---	---	---	---	---	---	---	---	---	---
Senior guard.....	Cu. 4-4.....	1,140-1,500	---	---	---	---	1	---	2	---	---	---
Senior mechanic.....	Cu. 7-3.....	1,680-2,040	---	---	1	---	---	---	---	---	---	---
Mechanic.....	Cu. 6-3.....	1,500-1,860	1	3	2	3	---	---	1	2	---	---
Junior mechanic.....	Cu. 5-3.....	1,320-1,680	---	2	---	1	---	---	---	---	---	2
Under mechanic.....	Cu. 4-3.....	1,140-1,500	3	9	22	2	---	1	2	---	---	3
Minor mechanic.....	Cu. 3-3.....	1,120-1,260	---	6	7	---	2	---	1	1	---	1
Assistant foreman of laboratory.....	Cu. 4-2.....	1,140-1,500	---	1	---	---	---	---	---	---	---	---
Senior laborers.....	Cu. 3-2.....	1,020-1,260	24	27	37	19	22	4	6	4	3	14
Junior laborers.....	Cu. 2-2.....	900-1,140	3	28	17	5	4	3	6	3	13	6
Senior dormitory attendants.....	Cu. 5-5.....	1,320-1,680	3	4	6	1	1	1	2	1	---	---
Junior dormitory attendants.....	Cu. 4-5.....	1,140-1,500	4	3	4	1	3	1	---	1	---	---
Under dormitory attendants.....	Cu. 3-5.....	1,020-1,260	1	11	8	5	6	1	7	2	---	---
Minor dormitory attendants.....	Cu. 2-5.....	900-1,140	34	70	75	48	49	46	24	29	12	7
Assistant clerk.....	C. A. F. 3-1.....	1,500-1,860	---	---	---	---	1	---	---	---	---	---
Under clerk.....	C. A. F. 1-1.....	1,140-1,500	---	1	---	---	---	---	---	---	---	---
Senior stenographer.....	C. A. F. 3-4.....	1,500-1,860	---	---	---	---	1	---	---	---	---	---
Under operator of office devices.....	C. A. F. 1-8.....	1,140-1,500	---	---	1	---	---	---	---	---	---	---
Total.....	---	---	216	322	318	282	327	174	156	158	115	184

The outstanding reasons for dismissals among attendants, nurses, and medical officers for the 5-year period ended June 30, 1926, are shown in the following statement:

	Attendant, male	Attendant, female	Psychiatric nurse, male	Psychiatric nurse, female	Junior psychiatric nurse, male	Junior psychiatric nurse, female	Junior medical officer, male
Using unnecessary force, abuse, and threatening patients:							
1922.....	12	2	---	---	---	1	---
1923.....	15	3	---	---	---	---	---
1924.....	17	---	1	---	---	---	---
1925.....	12	2	2	---	---	---	---
1926.....	11	---	---	---	---	---	---
Asleep on duty:							
1922.....	12	2	---	---	---	---	---
1923.....	8	1	---	---	---	---	---
1924.....	6	2	---	---	---	---	---
1925.....	3	---	---	---	---	---	---
1926.....	21	---	---	---	---	---	---
Intoxication:							
1922.....	6	---	---	---	---	---	---
1923.....	7	---	---	---	---	---	---
1924.....	5	---	---	---	---	---	---
1925.....	5	---	---	---	---	---	---
1926.....	5	---	---	---	---	---	---
Insubordination:							
1922.....	1	1	---	---	---	---	---
1923.....	2	---	---	---	---	---	---
1924.....	1	---	---	---	---	---	---
1925.....	---	---	1	---	---	---	---
1926.....	3	---	---	---	---	---	---
Absent without leave:							
1922.....	38	18	---	1	---	1	---
1923.....	50	10	---	---	---	---	1
1924.....	51	6	1	1	---	1	1
1925.....	43	7	---	---	1	---	---
1926.....	69	10	---	---	---	---	---



There follows a statement of infractions of rules which have been brought to the attention of the superintendent or disciplinary board, resulting in many cases in the application of some sort of punitive measures, the offenses not being sufficient to warrant dismissal from the service:

Nature of offense	Hospital attendants		Psychiatric nurse		Junior psychiatric nurse	
	Male	Female	Male	Female	Male	Female
Asleep on duty.....	70	20	3	1	8	6
Neglect of duty.....	11	8	4	1	1	2
Insubordination.....	3	3	1	0	0	1
Mistreatment of patients.....	4	3	3	0	1	1
Left post without permission.....	2	1	2	2	0	2
Withholding food from patient.....	0	1	0	0	0	0
Allowing patient to elope.....	41	0	13	3	2	1
Intoxication.....	4	0	2	0	0	0
Late in reporting for duty.....	4	0	1	0	0	0

In some instances one employee has been guilty of more than one offense. The following table lists first the number of separate offenses for which the employee has been disciplined, followed by the number of employees under each class:

Number of offenses	Hospital attendants		Psychiatric nurse		Junior psychiatric nurse	
	Male	Female	Male	Female	Male	Female
Seven.....	2	0	0	0	1	0
Five.....	2	0	0	0	0	1
Four.....	8	2	1	0	2	1
Three.....	20	5	4	0	2	0
Two.....	35	10	7	2	4	3

The following are some of the minor infractions of the rules of the hospital most frequently called to the attention of the employees:

Not providing themselves with uniforms at the end of the probationary period or keeping them in a neat and tidy condition; not keeping their rooms or quarters on the hospital grounds in a neat and tidy condition or retiring to their rooms or quarters at the hour set; failure to call the telephone switchboard operator hourly, as required by regulations—a frequent infraction which leads to finding employees asleep on duty. Employees failing to give the required two weeks' notice when leaving the service are usually reported to the Civil Service Commission.

The following table sets forth the length of service of certain classes of permanent employees of the hospital June 30, 1926, separated by sex:

	Less than 1 year		1 to 5 years		5 to 10 years		10 to 15 years		15 years and over		Total
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
Chief medical officers.....									1		1
Medical officers.....			9	3	13	1	2			1	29
Supervising nurses.....				7				2			9
Nurses.....				2							2
Psychiatric nurses.....	1	1	19	14	34	18	15	10	15	8	135
Supervisor of hospital.....				2	2	2		1	10	3	20
Attendants at hospital.....	87	22	142	57	80	41	17	7	9	2	464
Therapy aids.....			2	12	1	3		1	2		21

The records of the office disclose that a number of employees receiving temporary appointments have been continued in the service for from one to five years, although under civil-service rules temporary appointments to classified positions are limited to a period of not usually exceeding three months.

The Civil Service Commission has called the attention of the hospital to individual cases with the request that these employees file application and take proper examination or that their services be discontinued. The list of such employees follows:

Employees	Classification grade	Less than 1 year		1 to 5 years		5 to 10 years	
		Male	Female	Male	Female	Male	Female
Assistant chief nurse.....	SP-6-22.....		1				
Head dietitian.....	SP-5-21.....				2		
Hospital attendant.....	SP-2-14.....	26			1		
Junior laborer.....	Cu-2-2.....	2		7		3	
Junior psychiatric nurse.....	SP-3-17.....		1		1		
Mechanic.....	Cu-6-3.....			1			
Minor domestic attendant.....	Cu-2-5.....	4	1	8	8		
Principal scientific aid.....	SP-7-2.....	1					
Psychiatric nurse.....	SP-4-17.....				1		
Senior domestic attendant.....	Cu-5-5.....	1					
Senior laborer.....	Cu-3-2.....	7		6			
Senior mechanic.....	Cu-7-3.....					1	
Student nurse.....			17				
Under domestic attendant.....	Cu-3-5.....	1	1		2		
Total.....		42	21	24	15	4	0
Grand total.....			63		39		4

### (3) TRAINING OF PERSONNEL

The hospital maintains a training school for the purpose of training its nurses, psychiatric aids and attendants. This school is under the direct supervision of the superintendent of nurses. Lectures, recitations, and laboratory work are given by doctors and nurses of the hospital and are conducted in lecture rooms set aside for medical and surgical clinics and in the autopsy room in the laboratory.

The nurses' course covers a period of three years of training, two years of which are taken at St. Elizabeths Hospital and one year in affiliated hospitals of the District of Columbia. Admissions of trainees are made upon a student nurse's examination through the

local board of the Civil Service Commission. The requirements for this examination are that the applicant must have had at least two years in an accredited high school and must be between the ages of 18 and 30 years.

For the first six months trainees devote their time other than regular class periods to ward work in the hospital, while for the remainder of the two years the course is pursued outside of the regular working day. While in training student nurses receive \$288 per annum, with quarters, subsistence, laundry, and medical attention.

There have been 10 graduates since the nurses' course was extended in 1923 to cover a period of three years. Of this number seven have remained with the hospital and all but one have passed the examination give by the District of Columbia Nursing Association.

The psychiatric aid course is offered to ward attendants who desire to become better informed with respect to care and treatment of insane patients in the ward. Attendants are admitted to these classes upon an appropriate examination and must attend classes outside of their regular working hours. This course covers a period of two years, and graduates are promoted to the position of junior psychiatric nurse and subsequently are placed in charge of a ward.

The first class in this course graduated in 1922 with 24 graduates; in 1923 there were 30 graduates; in 1924 there were 21; in 1925, 19; and in 1926 there were 8.

A course of study is provided for the attendants employed in the wards of the hospital, the calendar for 1926 being as follows:

Introductory lecture, Doctor Noyes.

Ethics, Doctor O'Malley, 8 hours.

Precaution in handling drugs, Doctor Danneman, 2 hours.

General principles of bacteriology and hygiene, Doctor Kline, 4 hours.

Human behavior, Doctor Hall, 6 hours.

Mental diseases and nursing, Doctor Lind, 10 hours.

Emergencies, Doctor Main, 4 hours.

Care of teeth, Doctor Frank, 2 hours.

Practical demonstrations including bandaging, Miss Willson, 40 hours.

New attendants when reporting for duty are required to sign an agreement to attend this class of instruction. At the present time, however, there is no systematic procedure to see that attendants regularly attend these classes, with the result that not more than two-thirds of the number that remain with the hospital complete the course. The outstanding reason for this is the necessity of returning to the hospital to attend the class after work. This in some instances is a real hardship on an attendant whose salary is low, and if he lives on the opposite side of the city a large amount of time is used in traveling back and forth to the class.

Section A, who are on duty from 3 p. m. to 11 p. m., have lectures Mondays from 2 to 3 p. m. and recitations on Thursdays from 2 to 3 p. m. Section B, who are on duty from 7 a. m. to 3 p. m., have lectures on Mondays from 5 to 6 p. m. and recitations on Thursdays from 5 to 6 p. m. These hours, however, have recently been changed to from 3 to 4 p. m.

Attendants who do not complete this course of instruction are not eligible for promotion. Many attendants have been employed in the wards for many years, some even before the training school was established, and they feel that they know more about caring for the mentally sick than they would learn by sacrificing their time to attend the

course of instruction. Regardless of the efficiency rating they attain, and many are exceptionally high, they can not be promoted in the grade to which they have been allocated by the Personnel Classification Board until they have completed the course of instruction, and, there being no uniform system of keeping in touch with the attendants who are taking these courses, it follows that an attendant who completes his course is not given the reward to which the regulations entitle him.

In addition, there is an affiliated class, composed of student nurses who desire psychiatric training, from the hospitals affiliated with St. Elizabeths, viz, Garfield, Children's, Homeopathic, and Providence; also student nurses from Walter Reed Hospital. The course of instruction is usually of either two or three months' duration. On June 30, 1926, there were 17 student nurses attending the affiliated class.

Junior medical officers, or medical internes, are required to remain with the hospital for a period of one year and, in addition to having their duties closely supervised by the hospital medical officers, are required to attend a course of lectures during the winter months. These lectures are held daily except on Saturdays and are given by the members of the medical staff on the various forms of mental illnesses and the most approved method of treatment and care. At the end of the period, if they pass the required examination, they are appointed assistant medical officers, should they elect to remain with the hospital. Approximately 40 per cent remain with the hospital.

The schedule of lectures for the month of January which follows illustrates the scope of the work that is required.

	Jan. 3-7	Jan. 10-14	Jan. 17-21	Jan. 24-28	Jan. 31-Feb. 4
Monday-----	Clinico - pathological meeting.	Hall: Development and present status of psychiatric theories.	Clinico - pathological meeting.	Hall: Development and present status of psychiatric theories.	Clinico - pathological meeting.
Tuesday-----	Lewis: Relation of somatic disorders to mental disease.	Lewis: Relation of somatic disorders to mental disease.	Lewis: Relation of somatic disorders to mental disease.	Lewis: Relation of somatic disorders to mental disease.	Lewis: Relation of somatic disorders to mental disease.
Wednesday -	Richmond: Medical psychology and psychometric tests.	Richmond: Medical psychology and psychometric tests.	Richmond: Medical psychology and psychometric tests.	Richmond: Medical psychology and psychometric tests.	Richmond: Medical psychology and psychometric tests.
Thursday---	White: Descriptive and interpretative psychiatry.	White: Descriptive and interpretative psychiatry.	White: Descriptive and interpretative psychiatry.	White: Descriptive and interpretative psychiatry.	White: Descriptive and interpretative psychiatry.
Friday-----	Freeman: Clinical neurology.	Freeman: Clinical neurology.	Freeman: Clinical neurology.	Freeman: Clinical neurology.	Freeman: Clinical neurology.

#### (4) WORKING PERIODS AND LEAVE

The working day of employees varies with the kind of service performed. The hours of the medical and clerical forces are from 9 a. m. to 4.30 p. m., while artisans and laborers work eight hours, beginning at such times as required by their particular work. Those assigned to ward duty work in three eight-hour shifts, each shift beginning at 7 a. m., 3 p. m., and 11 p. m., respectively.

Annual leave is granted to employees of the hospital in accordance with rules and regulations promulgated by the Department of Interior



as follows: Doctors and clerical force not to exceed 30 days. Custodial force, laborers, and miscellaneous help not to exceed 18 days. Ward-service employees, including supervisors, nurses, aids, and attendants not to exceed 15 days.

Sick leave not to exceed 30 days each year is granted at the discretion of the superintendent to employees who during their illness are not quartered and receive medical attention in the hospital.

*Annual and sick leave and leave without pay taken during the calendar year 1925*

## MALE EMPLOYEES

Number of employees	Annual leave		Sick leave				Leave without pay			
	Entitled	Taken	Less than 5 days	5 to 9	10 to 20	Over 20	Less than 5 days	5 to 9	10 to 20	Over 20
138	30	30	24	16	7	1	40	33	28	12
34	30	29								
27	30	28								
31	30	27								
13	30	26								
46	30	20-25								
15	30	15-18								
6	30	10-14								
3	30	1-7								
11	16-28	10-27								
421	15	15								
41	15	6-14								
19	10-12	3-10								
56	5-8	1-7								
57	Under 5	1-3								
918	-----	15, 804	48 male employees took 312 days' sick leave.				113 male employees took 1,252 days' leave without pay.			

## FEMALE EMPLOYEES

Number of employees	Annual leave		Sick leave				Leave without pay			
	Entitled	Taken	Less than 5 days	5 to 9	10 to 20	Over 20	Less than 5 days	5 to 9	10 to 20	Over 20
108	30	30	10	5	10	5	30	21	12	21
11	30	29								
14	30	28								
20	30	27								
5	30	26								
18	30	20-25								
3	30	15-18								
6	21-25	15-20								
158	15	15								
3	15	8-10								
8	10-14	6-13								
27	5-9	2-7								
35	Under 5	1-3								
416	-----	7, 402	30 female employees took 323½ days sick leave.				84 female employees took 1, 599 days leave without pay.			

## (5) QUARTERS, SUBSISTENCE, AND OTHER ALLOWANCES

There were approximately 133 employees of the hospital living on the reservation June 30, 1926. These employees were living in family houses, male and female nurses' homes, the farmhouse at

Godding Croft, and the various buildings of the ward service and the industrial service.

Prior to August 1, 1919, all employees of the hospital lived on the grounds and received board, lodging, laundry, and medical attention. About that time increases in personnel made it necessary to provide quarters outside the grounds. The act approved March 6, 1920 (41 Stat. 513), made it possible to pay an allowance in lieu of quarters and subsistence to those employees who were to live outside, and also provided for the readjustment of salaries of all employees of the hospital. With the passage of the reclassification act of 1923 (42 Stat. 1489), effective July 1, 1924, the positions at St. Elizabeths Hospital and Freedmen's Hospital were reclassified, although both appear to be field offices and not included in the provisions of that act. The positions at these hospitals appear to be in a status similar to those in the Washington regional office of the Veterans' Bureau, the Hygienic Laboratory of the Public Health Service, Walter Reed Hospital, and the medical division of the navy yard, all located in Washington and not classified.

In the assignment of positions in St. Elizabeths Hospital the Personnel Classification Board followed the provision of section 3 of the reclassification act, which provides in part as follows: "The board shall make necessary adjustments in compensation for positions carrying maintenance." At that time these employees were receiving the \$240 bonus, so that the new salary included the former basic salary, bonus, and the sum allowed in lieu of subsistence or maintenance.

Since July 1, 1924, the hospital, in addition to paying the salaries fixed as above, has been furnishing quarters, subsistence, and other allowances, as specified in statement attached.

*St. Elizabeths Hospital—Allowances of officers and employees as of June 30, 1926*

Name of employee	Title	Location of quarters	Description of quarters	Heat and light	Heavy furniture	Miscellaneous items
White, William A....	Superintendent.....	Second floor, old center building.	Apartment.....	Supplied.....	Supplied.....	Tableware, silverware, kitchen ware, table linen, towels, bed clothing, rugs, laundry service, and an official telephone in the apartment. Domestic service paid on the rolls of the hospital as follows: 1 housekeeper, \$1,020; 1 waitress, \$960; 1 cook, \$1,380; and 1 assistant cook, \$1,080. Monthly average issue-value of foodstuffs furnished the superintendent's apartment, taken from figures compiled over the period June, 1925, to September, 1926, \$223.18.
Noyes, Arthur P....	First assistant physician..	Burrows cottage.....	2-story, 6-room, brick.	do.....	do.....	Tableware, silverware, kitchen ware, table linen, towels, bed clothing, rugs, laundry service partly furnished, and official telephone; 1 domestic paid on the rolls of the hospital for approximately 3½ hours per day. Monthly average issue-value of foodstuffs furnished, \$51.50, based on 4 scattered months.
Lind, John E.....	Medical officer.....	Staff cottage No. 1.....	2-story, 6-room, hollow tile.	do.....	do.....	Rugs, laundry service, and patient help as needed; this cottage originally furnished with all necessary blankets, spreads, sheets, pillowcases, and towels. No replacements allowed.
Lewis, Nolan D. C....	Senior medical officer.....	Staff cottage No. 2.....	do.....	do.....	do.....	Rugs, laundry service, and patient help as needed; bed furnishings same as No. 1.
Murphy, John P. H....	Medical officer.....	Staff cottage No. 3.....	do.....	do.....	do.....	Rugs, laundry service, and patient help as needed; no bed linen or blankets furnished.
Woolley, Herbert C....	Clinical director (senior medical officer).	Staff cottage No. 4.....	do.....	do.....	do.....	Rugs, laundry service, and patient help as needed; bed furnishings same as No. 1.
O'Malley, Mary.....	do.....	Staff cottage No. 5.....	do.....	do.....	do.....	Do.
Eldredge, Watson W....	Senior medical officer.....	Staff cottage No. 6.....	do.....	do.....	do.....	Rugs, laundry service for sheets only, and patient help as needed; no bed furnishings supplied.
Silk, Samuel A.....	Medical officer.....	Staff cottage No. 7.....	do.....	do.....	do.....	Rugs, laundry service partly supplied, and patient help as needed; bed furnishings same as No. 1.
Main, Daniel C.....	do.....	Allison A Building.....	7 rooms and bath	do.....	do.....	Rugs, part of bed linen, laundry service, and patient help as needed.
Haws, John R.....	do.....	do.....	4 rooms, kitchen, and bath.	do.....	Gas range and 1 bed.	Bed and table linen, towels, rugs, laundry service, and patient help as needed.
Hubbard, Lois D.....	Associate medical officer..	Toner Building.....	3 rooms, hall, bath, and 2 porches.	do.....	Heavy furniture supplied.	Bed and table linen, tableware, silverware, kitchen ware, towels, and rugs supplied; rooms cared for by hospital.
Fong, Theodore C....	do.....	Third floor, old center building.	1 room	do.....	do.....	All necessary furniture, furnishings, and laundry service supplied; room cared for by hospital.
Kenna, William M....	do.....	do.....	2 rooms	do.....	Supplied in part.	Furniture and furnishings supplied in part; laundry service provided; rooms cared for by hospital.

*St. Elizabeths Hospital—Allowances of officers and employees as of June 30, 1926—Continued*

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INVESTIGATION OF ST. ELIZABETHS HOSPITAL.

Name of employee	Title	Location of quarters	Description of quarters	Heat and light	Heavy furniture	Miscellaneous items
5.....	Assistant medical officers	Center, Oaks A and B Buildings.	1 to 3 room apartments.	Supplied.....	Supplied.....	All necessary furniture, furnishings, and laundry service supplied; rooms cared for by hospital.
7.....	Junior medical officers.....	A, C, and center Buildings.	1 room each.....	do.....	do.....	Do.
White, James.....	Foreman gardener.....	Shepherd tract.....	5-room frame.....	Not supplied..	Not supplied..	No allowances.
Wershbrod, E. Harry.....	Chief engineer.....	do.....	7-room frame.....	do.....	do.....	Do.
Dodge, Charles E.....	Foreman of garage (main mechanic).	do.....	6-room frame.....	do.....	do.....	Do.
Wines, William T.....	Farm foreman.....	Stevens tract.....	4-room frame.....	do.....	do.....	Do.
Tippett, Joseph C.....	Herdsmen.....	Shepherd tract.....	2-room frame.....	do.....	do.....	Do.
Cator, William.....	Cemetery sexton.....	do.....	6-room frame.....	do.....	do.....	Do.
O'Brien, Honora.....	Chief supervisor, domestic attendants.	A Building.....	3 rooms.....	Supplied.....	Supplied.....	All necessary furniture, furnishings, laundry service, and care of rooms supplied.
Vaughn, Alice.....	Chief nurse.....	Oaks Building.....	2 rooms.....	do.....	do.....	Do.
Martin, Emily L.....	Telephone operator.....	East Lodge.....	1 room.....	do.....	do.....	Do.
Drennen, Lulu.....	Head stenographer.....	Toner Building.....	do.....	do.....	do.....	Do.
Willard, Clara.....	Librarian.....	do.....	do.....	do.....	do.....	Do.
28.....	Supervisors and nurses.....	Various buildings.....	1 room each.....	do.....	do.....	Do.
31.....	Attendants.....	do.....	do.....	do.....	do.....	Do.
17.....	Student nurses.....	Female nurses' home.....	do.....	do.....	do.....	Do. <sup>1</sup>
7.....	Gardeners and mechanics.....	Engine house, bakery, center, and male nurses' home.	do.....	do.....	do.....	Do.
10 (9 male, 1 female).....	Farm employees.....	Goddard Croft.....	Brick farmhouse.....	do.....	do.....	Do. <sup>1</sup>
3.....	Laborers and minor domestic attendants.	do.....	None.....	None.....	None.....	Meals furnished while on duty.

NOTE.—1 senior medical officer, 3 medical officers, 2 associate medical officers, 4 junior medical officers, 1 bacteriologist, and 1 psychologist receive no quarters, subsistence, or allowance.

<sup>1</sup> Indicates subsistence furnished.



## VIII. ADMINISTRATION DIVISION

In the division of administration, under the direction of an assistant to the superintendent, are centered all of those activities and facilities of the hospital having to do with business operation and management. The clerical and fiscal offices of the hospital are concentrated in the administration building. To this central administrative point report all of the heads of the outside departments, such as the chief engineer, the matron, head dietitian, and the chiefs of the commissary service, the storehouse, laundry, farm, etc.

The following is an outline of the main units of the business organization of the hospital:

Superintendent.

Assistant to the superintendent:

- A. Office activities—
  - 1. Chief clerk.
  - 2. Accounting office.
  - 3. Disbursing office.
  - 4. Purchasing office.
  - 5. Personnel office.
- B. Food and food service—
  - 6. Head dietitian.
  - 7. Commissary service—
    - a. Kitchens.
    - b. Bakery.
    - c. Cafeteria.
  - 8. Commissary storehouse.
- C. General domestic activities—
  - 9. Matron.
  - 10. Laundry.
- D. Outside activities—
  - 11. Engineering division—power plant—
    - 1. Steam engineering.
    - 2. Electrical engineering.
  - 12. Construction division.
  - 13. Garage.
  - 14. Farming operations—
    - a. Farms and gardens.
    - b. Dairy.
    - c. Piggery.
    - d. Poultry farm.
  - 15. Orchard, vineyard, greenhouses, and lawns.
- E. Miscellaneous—
  - 16. Watch force.
  - 17. Cemetery.

## (A) OFFICE ACTIVITIES

## 1. CHIEF CLERK'S OFFICE

The chief clerk has supervision of the clerical force, examines and approves all authorizations for the commitment of patients; receives and has custody of all valuable personal property of patients and disposes of same on discharge or in event of death; examines all vouchers for payment of moneys and approves quarterly abstracts of expenditures and receipts; maintains daily census of patients; renders all reports required by the bureau of vital statistics of the District of Columbia, War Department, Navy Department, United States Veterans' Bureau, Bureau of Pensions, in connection with the hospitalization of patients; advises and assists patients in making applications for pensions, and maintains the necessary statistical records of patients, etc.

The per capita cost of maintaining patients at the hospital is computed from the number of patients shown by records in the chief clerk's office. According to this record on June 30, 1926, there were 4,345 patients in the hospital. The records of the medical staff gave 4,230 while actual count of cases in the file on that date disclosed 4,340.

Records of patients are kept as follows: The authorization for commitment of a patient is examined and approved by the chief clerk and filed in his office. The patient's name is entered on a loose-leaf register and three forms are prepared containing essential information in reference to the patient. These with a folder are forwarded to the record room, where two additional folders and four cards, blue for colored and white for white patients, are made. One of the cards is filed in the chief clerk's office, one in the proper male or female clinical director's office, and the other two in the record room. One of the folders follows the patient through the various wards, the other two, containing corresponding and patient's history, are filed in the record room. Additional card records of patients are kept in the office of each clinical director to show the status of each case, a new card being made out in case of readmission, discharge, or death. It is understood that these are used to assist in the understanding and treatment of certain patients rather than as an exact record of all patients.

## 2. ACCOUNTING OFFICE

The accounting office is in charge of a chief accountant who supervises and directs the maintenance of property, cost, and accounting records. He examines claims, prepares reports of obligations and disbursements and such other general financial and inventory statements as may be required. There are seven employees in the accounting office, three of whom render assistance each day in the performance of the work of the disbursing agent and the purchasing agent.

## 3. DISBURSING OFFICE

The disbursing agent receives, disburses, and accounts to the General Accounting Office for all public moneys made available for the use of the hospital and all moneys of patients that come into the possession of the hospital authorities. He handles approximately \$2,750,000 annually. The money of patients is received from the patients themselves, from relatives, committees, or guardians and also from the Veterans' Bureau and Pension Office. The patient's money is disbursed for the patient's benefit on approved pay rolls and in payment of approved vouchers for clothing, etc., purchased for patients. There are four employees in the disbursing office. The disbursing agent and his deputy are each bonded in the sum of \$60,000 for the faithful performance of their duties. The disbursing office is provided with a steel, fireproof vault.

## 4. PURCHASING OFFICE

The purchasing office is in charge of a purchasing agent who solicits bids for supplies, examines proposals, makes awards, attends meetings of the General Supply Committee to which he is a representative, examines samples, recommends awards, and orders supplies. Three employees connected with the office of the chief accountant render the purchasing agent any necessary clerical assistance.

## 5. PERSONNEL OFFICE

The personnel office, in charge of a personnel officer who is the local representative of the Civil Service Commission, prepares personnel records, reviews applications for employment, interviews applicants for employment, maintains eligible registers for other than scientific and technical positions at the hospital as may be prescribed by the Civil Service Commission, supervises all correspondence, reports, and files relating to the personnel of the hospital, and examines, and rates applications for local positions and issues keys to new employees. There are four employees in this office.

## (B) FOOD AND FOOD SERVICE

The dining rooms, kitchens, and the selection and preparation of foods are under the joint supervision of the head dietitian and the chief of commissary.

All the foods used are obtained by requisitions on the storeroom, which maintains its supply through receipts from the farm or by purchases. The quantities to be obtained by the storeroom are based upon estimates compiled jointly by the head dietitian and the chief of commissary. The storeroom is provided with cold-storage facilities for storing perishable goods and grains or cereals that are subject to attack by weevil and other insects.

Food for the 4,000 patients of the hospital is prepared in nine different kitchens, to each of which has been assigned the task of providing for certain buildings and wards. These kitchens are all equipped with modern culinary apparatus and are provided with storage and refrigeration rooms. The largest of these is that known as the general kitchen, which supplies the dietary needs of the 1,200 or more patients assigned to Howard Hall and the west side departments. This kitchen occupies a part of the second floor of a large brick building, which was erected in 1878 and to which additions were made in 1883 and 1890. The remainder of the building is used for a bakery, ice-cream plant, and for storage. Food for the various buildings served by this kitchen is transported through underground food tunnels on specially constructed cars, except for west lodge, to which it is supplied by trucks or carts, there being no food tunnel.

The general kitchen employs 20 paid cooks and assistants and uses 30 patients for an average of five and one-half hours a day.

The detached kitchen, which occupies the second floor of a two-story, brick building erected in 1900, prepares the food for the so-called detached department, in which there are approximately 735 patients. To this kitchen there is attached a general dining room in which all of the patients in this department, except those housed in the Allison buildings, eat. Food for the Allison buildings is transported from the detached kitchen by trucks or carts. This kitchen utilizes the service of 10 patients and 8 paid employees.

The 274 patients hospitalized in buildings B, C, and M are provided for by what is known as the A kitchen. This kitchen is located in the basement of the administration building and food therefrom is transported to the buildings it serves by means of food tunnels and motor truck. Buildings B and C are provided with food tunnels but building M receives its apportionment by motor truck. This kitchen employ six paid workers and three patients.

Food for the 500 or more patients housed in those buildings constituting the Richardson department is prepared in two kitchens, one of which is located in the B building and which, by reason of its location, has been designated as P kitchen. This kitchen serves the patients in the P and N buildings, numbering approximately 185, and employs in connection with preparing their food five salaried employees and four patients. Building N is close to building P so that food can be carried over without the use of tunnels or trucks. Those 320 or more other patients of the Richardson department who are hospitalized in the semipermanent buildings and tuberculosis cottages are fed by what is known as S. P. B. kitchen. This kitchen occupies the first of a series of nine semipermanent buildings of wood and stucco finish that were erected in 1910. The second building is used as a general dining room for the patients housed in the seven ward buildings, with which it is connected. In supplying the needs of those patients in the semipermanent buildings and those patients in the tuberculosis cottages, to which the food is carried by trucks or carts, the S. P. B. kitchen uses five paid employees and four patients.

Food prepared in the R kitchen, which gets its designation from its location in the basement of the R building, is used by patients of that building and of building I, who number approximately 244. The I building is close enough to R kitchen to permit food to be carried over by patients and employees in the regular service containers. This kitchen has four paid workers and three patients.

Q kitchen, to which is assigned the task of providing for the 240 female patients in Q building, occupies the basement of that building and uses three employees and two patients.

The Toner kitchen, which occupies a part of the second floor of the Toner building, is charged with the feeding of approximately 550 female patients. These patients are housed in the J, K, L, Toner, oaks 1 and 2 buildings, and tuberculosis cottages 4 and 5. A large dining room on the second floor of the Toner building accommodates the patients of that building and also those patients housed in building L. Their food is moved from the kitchen by a conveniently situated elevator. Oaks buildings 1 and 2 adjoins the Toner building so that their allotments of food need be carried only across the porch. Buildings J and K and tuberculosis cottages, being more distantly situated from the kitchen, are supplied by motor trucks. The Toner kitchen uses seven paid employees and five patients.

*Comparative statement of number of patients and workers*

Kitchen	Approximate number of patients served	Workers	
		Paid	Patients
General.....	1,198	20	30
Detached.....	735	8	10
A.....	274	6	3
S. P. B.....	320	5	4
P.....	183	3	3
R.....	244	4	3
Q.....	240	3	2
Toner.....	554	7	5
Total.....	3,748	56	60



The above kitchens and all service and dining rooms are inspected regularly by the head dietitian and her assistants and by the chief of the commissary. It is believed that these inspections should have resulted in the elimination from some of the kitchens of the excessive number of flies that were found therein during the summer months. The general kitchen is at present in need of repairs, for which materials have already been procured.

In conjunction with the kitchen the hospital operates a modern bakery that produces, in addition to hundreds of pies, cakes, and other forms of pastry, an average of 3,000 fifteen-ounce loaves of bread and 9,100 rolls a day. This bakery is well equipped with modern ovens and other machinery and appears to be efficiently operated.

There is also an ice-cream plant operated in conjunction with the dairy that supplies ice cream for the entire hospital at least twice each week.

For the hospital there are five principal diets, all of which, except the sick and special diets, are worked out by the head dietitian and the chief of commissary. The sick and special diets, while prepared in the regular kitchens, are generally prescribed by the physicians in the various wards. The general diet is selected with a view to providing, as a means of proper sustenance, an adequate number of calories. No deviation is made in the general diet to suit the individual tastes of patients. Eggs, for instance, are usually served scrambled, though there may be a preference on the part of some patients to have their eggs fried or soft boiled. A typical menu for the general diet is as follows:

#### GENERAL DIET—DAILY MENU FOR 10-DAY PERIOD

##### SUNDAY

*Breakfast.*—Rolled oats, milk, sugar, scrambled eggs, rolls, oleo, coffee.

*Dinner.*—Roast beef, gravy, mashed potatoes, pickled beets, bread, oleo, cream, rice pudding.

*Supper.*—Cold meat, pears, bread, oleo, kale, tea.

##### MONDAY

*Breakfast.*—Hominy grits, milk, sugar, frizzled beef, bread, oleo, coffee.

*Dinner.*—Vegetable soup, boiled shoulder, string beans, bread, oleo, ginger-bread.

*Supper.*—Baked macaroni, cheese, apple sauce, bread, oleo, tea.

##### TUESDAY

*Breakfast.*—Corn flakes, milk, sugar, steak, gravy, rolls, oleo, coffee.

*Dinner.*—Bean soup, beef pot roast, gravy, browned potatoes, cucumbers, bread, oleo, tapioca cream pudding.

*Supper.*—Baked hash, peaches, bread, oleo, tea.

##### WEDNESDAY

*Breakfast.*—Corn-meal mush, milk, sugar, liver and bacon, gravy, rolls, oleo coffee.

*Dinner.*—Split-pea soup, corned beef, corn bread, cabbage, bread, oleo, floating island.

*Supper.*—Bologna, potato salad, ginger cakes, tea.

## THURSDAY

*Breakfast.*—Rolled oats, milk, sugar, fried ham, gravy, rolls, oleo, coffee.

*Dinner.*—Chicken potpie, boiled rice, peas, bread, oleo, caramel cornstarch pudding.

*Supper.*—Baked beans, brown bread, apple sauce, bread, oleo, tea.

## FRIDAY

*Breakfast.*—Rolled oats, milk, scrambled eggs, rolls, oleo, coffee.

*Dinner.*—Fresh fish, mashed potatoes, coleslaw, bread, oleo, coffee, lemon pie.

*Supper.*—Codfish cakes, sliced tomatoes, bread, oleo.

## SATURDAY

*Breakfast.*—Corn flakes, milk, sugar, baked beans, rolls, oleo, coffee.

*Binner.*—Mock turtle soup, roast lamb, gravy, mashed potatoes, tomatoes, bread, oleo, cornstarch pudding.

*Supper.*—Cold hamburger loaf, prunes, bread, oleo, tea.

## SUNDAY

*Breakfast.*—Corn flakes, milk, sugar, mackerel, rolls, oleo, coffee.

*Dinner.*—Roast veal, gravy, vegetable soup, crackers, mashed potatoes, peas, bread, oleo, chocolate bread pudding.

*Supper.*—Bologna, sliced tomatoes, ginger cakes, tea.

## MONDAY

*Breakfast.*—Rolled oats, milk, sugar, steak, rolls, oleo, coffee.

*Dinner.*—Chicken potpie, boiled rice, squash, bread, oleo, watermelon.

*Supper.*—Potato and egg salad, rhubarb sauce, bread, oleo, tea.

## TUESDAY

*Breakfast.*—Hominy grits, milk, sugar, rolls, oleo, scrambled eggs, coffee.

*Dinner.*—Fresh fish, boiled potatoes, coleslaw, bread, oleo, lemon pie.

*Supper.*—Salmon salad, apple sauce, bread, oleo, tea.

A separate menu is prepared for officers and retired officers of the Army and Navy which provides steaks and chops for breakfast, caters to their tastes and desires regarding the manner in which eggs shall be served, and provides one more vegetable and a salad when possible. Patients suffering from tuberculosis are provided with a different diet and there are special diets for the sick.

In addition to the kitchens listed above the hospital also operates a cafeteria in a portable frame and stucco building donated by the Public Health Service in 1924, which furnishes for its employees food at cost. Charges are based on the cost of materials plus the cost of preparation and service. About 500 meals are served during each day's business hours, which extend from 5.30 a. m. to 1 a. m. All food served is prepared in the cafeteria kitchen. During the summer months, due to the absence of employees on leave, the expenses of the cafeteria exceed the revenue, but on a year's business a balance is usually obtained without a fluctuation in prices. The business of the cafeteria is conducted on a cash basis, no credit being extended to its patrons. Student nurses whose contracts of employment provide for the payment of a nominal salary with subsistence are allowed to take their meals at the cafeteria. These nurses are not limited so far as the amount of food they may order is concerned. A record of cash sales is made on white sales slips, which at the close of the day are

checked against the cash receipts. Meals served to student nurses are recorded as to the sales value on pink slips, which these nurses are required to sign. The food served by this cafeteria seems to be entirely satisfactory. The building and service are clean and orderly.

The quantities of food used by the hospital, except for issue to the superintendent and the first assistant physician, are set forth in the following statements:

*Foods used by kitchens during month of October, 1926*

	General	De- tach- ed	Toner	A	P	Q	R	S	Cafe- teria	Total
Population.....	1, 198	735	554	274	183	240	244	320	-----	3, 748
FOODS										
Fresh fish.....pounds	3, 077	1, 625	1, 315	645	445	550	680	995	340	9, 602
Salt cod.....do	124	60	88	50	75	55	80	95	3	630
Salt mackerel.....do	1, 375	785	540	300	250	270	33	315	24	3, 892
Salmon, canned.....do	576	575	288	192	48	96	98	143	-----	2, 016
Beef, fresh.....do	12, 667	8, 640	4, 840	3, 569	2, 145	2, 340	1, 685	3, 960	1, 608	41, 454
Chicken.....do	2, 868	1, 600	1, 317	805	520	520	937	978	605	10, 169
Lamb.....do	1, 209	770	445	304	170	200	150	356	105	3, 709
Liver.....do	521	420	225	155	95	120	30	125	15	1, 706
Pork.....do	2, 393	1, 030	575	421	328	431	140	456	195	5, 969
Veal.....do	1, 098	760	430	305	160	200	165	348	186	3, 652
Bacon.....do	1, 900	420	370	195	95	105	515	583	134	3, 317
Beef, corned.....do	2, 775	2, 580	1, 285	840	520	575	-----	790	40	9, 405
Beef, dried.....do	570	282	132	54	18	36	54	30	-----	1, 176
Ham.....do	600	530	275	303	200	215	308	270	917	3, 618
Bologna.....do	465	170	80	70	60	55	-----	90	-----	990
Sausage, smoked.....do	1, 538	775	360	270	160	210	30	235	-----	3, 578
Shoulder, smoked.....do	1, 999	1, 700	920	590	395	465	15	615	-----	6, 699
Butter, oleo.....do	4, 554	1, 460	960	780	530	720	550	1, 260	324	11, 138
Cheese.....do	350	190	196	70	40	40	15	40	85	1, 025
Chocolate.....do	150	80	90	20	30	25	30	20	20	465
Coffee.....do	1, 825	1, 110	830	475	390	410	355	970	475	6, 840
Eggs.....dozen	2, 520	975	1, 050	870	365	413	1, 110	930	657	8, 890
Lard.....pounds	375	55	55	110	55	-----	165	55	570	1, 440
Ice cream.....gallons	321	270	185	96	60	75	85	131	230	1, 443
Milk, fresh.....do	5, 773	2, 510	2, 447	1, 599	688	598	2, 098	2, 657	524	18, 894
Milk, condensed.....16 oz. cans	-----	-----	-----	-----	-----	-----	-----	444	-----	444
Barley.....pounds	50	10	-----	-----	-----	-----	-----	17	77	77
Beans, dried pea.....do	1, 000	1, 000	600	300	300	100	-----	500	138	3, 438
Cornflakes.....do	380	150	120	80	40	60	80	130	20	1, 060
Cornstarch.....do	200	107	30	46	30	10	38	50	42	553
Hominy, coarse.....do	400	200	-----	-----	-----	100	-----	100	-----	800
Hominy grits.....do	400	100	300	-----	100	100	200	100	-----	1, 300
Macaroni.....do	609	240	240	120	160	80	120	220	25	1, 814
Meal, corn.....do	1, 000	600	600	-----	200	100	-----	200	110	2, 810
Oats, rolled.....do	990	450	540	360	180	90	270	360	45	3, 285
Peas, split.....do	360	120	120	25	30	50	25	30	-----	760
Rice.....do	1, 048	800	600	400	200	-----	200	300	60	3, 608
Tapioca.....do	300	110	50	40	60	-----	-----	60	-----	620
Flour.....do	1, 666	588	686	294	294	294	196	392	1, 005	5, 415
Bread.....15 oz. loaves	22, 200	13, 386	6, 270	5, 144	3, 676	4, 530	3, 469	6, 576	783	66, 034
Rolls.....2½ oz. rolls	73, 008	46, 080	31, 104	16, 848	13, 464	16, 848	9, 564	18, 820	1, 356	227, 092
Beans, Lima.....bushels	64	2	1	-----	-----	-----	3	7	5	24½
Beans, string.....barrels	14	9	5	5	2	2	4	6	4	51
Beans, canned.....gallon cans	216	216	96	48	12	30	36	84	-----	738
Beets.....bunches	461	-----	120	20	70	-----	60	-----	180	911
Cabbage.....barrels	47	26	18	11	9	9	2	15	5	142
Carrots.....bunches	132	60	70	70	25	45	95	89	83	669
Corn, canned.....20 oz. cans	1, 728	720	240	192	168	144	192	384	192	3, 960
Eggplant.....single	1, 538	886	475	475	417	224	20	310	178	4, 523
Lettuce.....head	159	135	133	109	66	66	86	136	132	1, 022
Onions, green.....bunches	1, 070	330	350	275	125	105	200	250	285	2, 900
Parsley.....do	51	31	27	25	14	12	26	23	21	230
Peppers, green.....bushels	104	62	42	29	19	18	7	33	5	319
Pickles, cucumber.....single	-----	-----	929	-----	-----	100	-----	-----	148	1, 177
Potatoes.....pounds	26, 200	13, 050	6, 750	7, 350	4, 500	3, 300	3, 750	7, 500	3, 170	75, 570
Pumpkins.....single	100	73	60	50	40	40	25	70	15	473
Radishes.....bunches	1, 900	800	350	650	375	605	25	700	20	5, 425
Spinach.....barrels	3½	2	-----	-----	-----	-----	5	-----	5	15½
Squash.....single	610	315	-----	200	-----	-----	60	-----	70	1, 255
Tomatoes, canned.....gallon cans	522	234	264	210	84	72	132	138	102	1, 768
Tomatoes, fresh.....bushels	118	55	36	25	16	14	12	-----	8	284
Turnips.....bunches	438	-----	280	100	-----	-----	100	-----	160	1, 078
Apples, fresh.....bushels	103	52	43	36	29	27	26	40	15	371
Apples, evaporated.....pounds	500	200	400	-----	-----	100	-----	-----	-----	1, 200

*Foods used by kitchens during month of October, 1926—Continued*

	General	De- tach- ed	Toner	A	P	Q	R	S	Cafe- teria	Total
Citron.....do.....	56	25	48							123
Currants, dried.....do.....	100	50	25	25	25	25	25	25		300
Figs.....quarts.....			10					20	20	50
Lemons.....dozen.....	21	5		8		2	51	18	62	167
Oranges.....single.....	126						624		1,176	1,926
Peaches, fresh.....bushels.....	24	14	10	6	6	6	6	10	9	91
Peaches, canned.....30 oz. cans.....	288	264	312		48	144	144	240	24	1,464
Peaches, evaporated.....pounds.....	350	225	350	200	50	50	125	75		1,425
Pears, canned.....30 oz. cans.....	576	360	456	192	144	96	288	48		2,160
Pineapples, canned.....do.....	864	528	96	144	144	240	144	216	24	2,400
Prunes, dried.....pounds.....	1,500	250	250	150	50	50	300	200	25	2,775
Raisins, dried.....do.....	375	375	200	100	100	75		150		1,325
Rhubarb, canned.....gallon cans.....	180	42	84		24	36	12	60	6	444
Sirup.....gallons.....	98		22	30	3	20	5		7	185
Molasses.....do.....	24	14	6	4		8	12		1/2	68 1/2
Sugar.....pounds.....	13,333	5,900	4,627	3,320	2,165	2,040	1,960	4,230	1,205	38,780

*Comparative statement showing the average per capita consumption of food daily for months indicated*

Item	Septem- ber, 1925	August, 1926	Septem- ber, 1926
Butter.....do.....ounces.....	1.295	1.367	1.446
Cheese.....do.....do.....	.148	.121	.133
Coffee.....do.....do.....	.723	.805	.828
Corn, canned.....do.....do.....	.535	.211	.339
Eggs.....do.....single.....	.787	.829	.881
Farinaceous.....do.....ounces.....	12.681	12.126	12.639
Fruit, dried.....do.....do.....	.792	.596	.439
Fruit, canned, preserves, jellies, etc.....do.....	1.196	1.820	1.497
Lard.....do.....do.....	.293	.289	.353
Meats.....do.....do.....	13.015	14.924	15.223
Milk.....do.....pints.....	.926	1.242	1.321
Peas, canned.....do.....ounces.....	.521	.384	.559
Potatoes.....do.....do.....	10.005	9.326	8.835
Sugar.....do.....do.....	4.626	5.158	4.973
Tea.....do.....do.....	.127	.189	.166
Tomatoes, canned.....do.....do.....	.281	.289	.944

The preparation of food in large quantities involves much handling before it finally reaches the table. This handling tends to break up vegetables, such as beans, potatoes, etc., and fish and meat loaves. To avoid this, as much as possible, those kitchens serving the largest groups of patients, while provided with a larger number of vessels, use the same size cooking equipment as is found in the smaller kitchens.

Meals are usually served after the fashion of a plate dinner, vegetables, meats, and jellies or preserves being put on the plate before served to the patients. A member of the staff of the head dietitian determines the quantities of food to be allowed to the patients and directs its service by attendants and other dining-room assistants.

To feed the 4,000 or more patients in the hospital 7 dietitians, 105 cooks, bakers, and kitchen assistants and 16 dining-room attendants work 8 hours a day. These are assisted by 272 patients, who work on an average of 5 1/2 hours a day and perform such duties as preparing vegetables, washing dishes, scrubbing floors, setting tables, and removing dishes.

Bones and grease that have become unfit for cooking are sold to a merchant on regular contract, who calls for the accumulation once



each week. Garbage from the kitchens is removed by the hospital farm wagon to the piggery, where it is used for feeding. Excess accumulations are removed by the District of Columbia garbage service.

#### 8. COMMISSARY STOREHOUSE

The storehouse is a three-story and basement brick building situated in the northwest section of the hospital reservation, in which are stored groceries, meats, fish, vegetables, fruits, and other food supplies, such as oleo, cheese, eggs, etc., china, table silver, crockery, cooking utensils, brooms, brushes, tobacco, etc. Cold-storage rooms with varying temperatures are used for storing eggs, cheese, oleo, fruits, fresh and dried, cereals, green vegetables, meats, and fish. Most of the meat is stored on the first floor where space has also been provided for receiving, cutting, and preparing for issue to the kitchens.

Supplies are procured by requisition upon the purchasing agent, who places orders for purchases. All purchases are made in accordance with the requirements of the general supply committee.

All meats, poultry, eggs, fruit, and vegetables, produced on the farm, are turned into the storehouse on invoice.

Brushes, brooms, and fly swatters are made by the patients in connection with the occupational therapy of the hospital. These appear to be of very good quality and are invoiced to the storeroom.

A record is maintained of all supplies purchased, produced, or otherwise procured by the purchasing agent.

Supplies are issued only on requisitions approved by the administrative assistant, except that the head dietitian and the steward may order food supplies for the hospital kitchens and cafeteria.

The personnel of the storehouse includes the storekeeper, 2 assistants, 1 meat cutter, and 2 assistant meat cutters; 2 patients help to put up certain classes of orders and make deliveries.

### (C) GENERAL DOMESTIC ACTIVITIES

#### 9. MATRON

The matron is in direct charge of officers' quarters, except cottages, the nonward housekeeping, the tailor shop, the sewing room, the upholstery shop, the mattress shop, and the dry-goods store. She also selects supplies for household furnishings in open market, condemns all household furnishings and supplies, examines and approves requisitions for household furnishings and supplies, and has general supervision over the employees in the domestic service and the female employees of the laundry. The employees in the office of the matron number 28. Besides these an average of 122 patients is employed daily doing such work as mending and sewing, and general domestic work as cleaning rooms, halls, etc. These patients work an average of  $5\frac{1}{2}$  hours a day.

The tailor shop is supervised by an assistant forewoman, who has charge of the 22 patients who make overalls, jeans, suits, underwear for men, mattress ticks, pillow ticks, sew names on private clothing, clean and press suits for patients, and make alterations.

The sewing room, supervised by a forewoman, employs 8 domestic attendants and 30 attendants. Here are made dresses, underwear

for female patients, nurses' gowns and caps, doctors' suits used in the operating room, pillow cases, sheets, table linen, night shirts, and checked work shirts for men, all window shades used at the hospital; blankets are cut and hemmed, and all other work of a similar nature.

The upholstery shop, supervised by one of the mechanics, reupholsters furniture, hangs window shades, lays carpets, etc., patients assisting only when necessary.

The mattress shop, supervised by one of the mechanics, makes new mattresses and renovates old ones. Patient help is used only as needed.

The dry-goods store under the supervision of the assistant matron, carries in stock the new material used in the various shops and sewing rooms; also ready-made clothing for both male and female. The new material made up in the shops is returned and reissued through the dry-goods store. Practically all material is purchased under the General Supply Committee schedules.

#### 10. LAUNDRY •

The hospital operates a steam laundry of sufficient capacity to take care of all the work of the institution. The plant is housed in a three-story and basement building of brick construction and is equipped mostly with modern equipment. The first floor is used for washing, drying, and machine-ironing and sorting of ward laundry and patients' wearing apparel. A section of this floor and certain machinery are reserved exclusively for washing the laundry of the doctors and nurses, which is handled separately. The second floor is used for hand ironing and pressing the linen of doctors and nurses. A section of this floor is set apart for a repair shop, which is equipped with the necessary sewing machines. Damaged clothes, etc., are mended here by patients under the supervision of paid employees. The third floor is equipped with lockers and dressing rooms for employees, and a room is set apart for unidentified articles of laundry.

The laundry is operated under the supervision of a paid foreman with 1 assistant and 32 paid employees. In addition to these 34 paid employees, 125 patients of the hospital are engaged in doing the laundry work. Steam, hot and cold water, electric power and lights are supplied from the main power house and water supply. The output of the laundry is conservatively stated at 100,000 pieces a week, or 5,200,000 pieces annually.

The cost of operating the laundry for the past five years has averaged about \$57,000 annually, which includes all supplies, light and power, replacements and repairs to machinery, but does not include depreciation.

The basement of the laundry building is used for receiving and classifying the articles gathered from the various points or stations.

Laundry from the various wards is placed in small houses and laundry boxes back of the ward buildings, some of which are provided with locks. Twice daily the laundry is collected by patient help and carried, mostly by truck, to the basement of the laundry where the classification takes place. At the time of inspection no effective effort was made to keep the pieces soiled with excreta from the untidy wards from coming in contact with the less soiled pieces.

The patient help doing the sorting manifested no great interest in their work and handled the bodily soiled laundry in a careless manner.

The doors to the basement were not screened and many flies were attracted by the filth on hot days.

Laundry from wards where patients are afflicted with communicable diseases is put through a sterilizing process before any attempt at sorting is undertaken.

Laundry work may be divided into three classes as follows:

1. Personal clothing of patients either brought to the hospital upon admission or furnished by them or their relatives during their stay at the hospital.

2. Wearing apparel furnished by the hospital to patients who are not financially able to purchase their own clothes.

3. Ward work such as bedding, table linens, towels, etc.

A record with a short description is made by the supervisor of the receiving service of patients' clothing upon admission to the hospital. Later the patient's name is written in ink on each garment except dark clothing, in which case the name is labeled on a piece of white cloth and sewed to the garment. Clothing purchased from the patient's own funds or furnished by relatives and friends is labeled in a similar manner.

All ward material and all garments issued from the hospital supply are labeled with the name and number of the ward by the service supervisor or assistants before they are put into use in the ward. The same method of marking is carried out with respect to articles belonging to patients.

Clothing of individual patients of each ward is sent to the laundry in bulk without listing the items. The laundry puts it through the wash and attempts to assort and return to the respective wards, by the use of a roster of the names of patients in the various wards. The lack of system in properly listing the work sent in results in confusion and misplacement and inevitable delay at the laundry.

Some of the wards make lists of hospital work sent to the laundry and endeavor to check the articles returned; others make lists but do not check up the returns, and still others make no attempt at listing or checking and do not know their shortages unless the supply at the ward is completely exhausted. Consequently the laundry has no systematic record of the work sent in by wards and nothing to guide it in the return of exact quantities to each ward. This method, or lack of method, makes it impossible to determine whether missing articles have been destroyed, misplaced, lost or stolen, or returned to the wrong ward, resulting in a shortage for some and a possible surplus for others.

It very frequently happens that the ward mark fades in the wash because the marking ink does not have sufficient durability to withstand the chemicals used in the laundry, although it is claimed that the ink has been tested by the Bureau of Standards and recommended to the Bureau of Supplies for laundry-marking purposes. Sometimes patients tear off the labels from their clothing and for that reason the ward to which it belongs can not be determined. Such articles as can not be identified on account of the ward mark or name of patient washing out or the label being torn off are sent to the room for unidentified laundry, from the stock of which complaints of shortage are satisfied as far as possible.

It was observed in the inspection of hospital facilities on September 9, 1926, that beds in some of the wards were without sheets and pillow

cases and those wards had the appearance of not having sufficient ward linen to meet the requirements of the patients.

Ward reports show shortages of linen on September 23, 24, and 25, 1926, as follows:

September 23: Sheets, 209; pillow cases, 43; bedspreads, 71; stand covers, 24; and 1,068 bath and face towels.

September 24: Sheets, 528; spreads, 172; pillow cases, 164; face towels, 110; bath towels, 111; tea towels, 24; tablecloths, 2; and stand covers, 10.

September 25: Sheets, 530; bedspreads, 123; pillow cases, 175; towels, 236; table covers, 4; and stand covers, 15.

This condition may be traceable to lack of sufficient stock in each ward, losses, and misplacements, damaged material sent to the repair room, etc.

Investigation disclosed that there were in the repair room on June 30, 1926, and not taken up on any inventory, as many as 1,400 sheets, and 75 spreads as well as quantities of smaller articles.

On September 22, 1926, the foreman of the laundry reported the finding of a lot of laundry that had been thrown in a ravine back of one of the buildings. The lot contained 119 suits of overalls, 92 pairs of socks, 5 work shirts, 33 dress shirts, and 44 suits of underwear. The presumption is that these articles were thrown into the ravine by the delivery man or men. The motive is not known. After this discovery and report the foreman resigned and his place was filled on October 21, 1926.

The following is an inventory of the unidentified pieces of laundry as of October 28, 1926, found in the room set apart for unidentified articles:

#### HOSPITAL PROPERTY UNIDENTIFIED AS TO WARDS

<i>Male</i>			
Army shirts	10	Overalls	44
Coats, jeans	1, 063	Sweaters	41
Undershirts	21	Navy blouses	9
Socks	1, 306	Coats, white crash	2
Shirts, starch	9	Undersuits, heavy	12
Handkerchiefs	333	Shirts, night	5
Soft collars	42	Bathrobe	1
Slip-on sweaters	17	Vests, jeans	203
Pants, white crash	7	Wash cloths	12
Vests, white crash	2	Sheets	10
Shirts, check	4	Bath towels	54
Ties	13	Tablecloths	111
Caps, Navy	2	Stand covers	43
Couch covers	3	Rugs	228
Bags	5	Tea towels	53
Pillow slips	10	Kitchen aprons	8
Face towels	55	Napkins	14
Spreads	14		
Blankets	50	<i>Female</i>	
Khaki shirts	17	Dresses	6
Bureau covers	13	White skirts	4
Screen covers	8	Aprons	7
Sanitary napkins	20	Dress skirts	4
Overcoats	16	Waists	2
Pants, jeans	738	Shawls	9
Underdrawers	14	Chemise	2
Shirts, working	41	Union suits	1
Collars	74	Drawers	5
		Night dresses	7

Some of the above articles were in a bad condition.



## PRIVATE CLOTHING

*Male*

Collars.....	14	Collars, soft.....	8
Handkerchiefs.....	27	Dress shirts.....	19
Union suits.....	9	Drawers.....	6
Undershirts.....	7	Drawers, B. V. D.....	10
Union suits, B. V. D.....	4	Pajama coats.....	9
Pajama pants.....	21	Night shirts.....	2
Coat.....	1	Socks.....	799

*Female*

Dresses.....	26	Slips.....	32
Bathing suit.....	1	Petticoats.....	2
Drawers.....	6	Chemise.....	1
Bath towels.....	17	Waists.....	9
Gowns.....	5	Skirts.....	28
Corset covers.....	6	Robes.....	3
Corsets.....	4	Apron.....	1
Union suits.....	14	Vests.....	3
Handkerchiefs.....	29	Coats.....	5
Sweaters.....	7	Neck scarfs.....	3
Stockings (pairs).....	82		

Some of these articles were in bad condition.

In view of all the conditions described it would seem that a greater degree of care and supervision should be given to the gathering up of laundry in the respective wards, transportation to the laundry in such shape as to be readily identified, and in receiving, handling, and delivery by the laundry.

Inasmuch as practically all of the bed and table linen, as well as towels and other articles, is fabricated in the institution, a system of marking could be inaugurated in the fabricating department in lots suitable and necessary for each separate division. This would facilitate the issuing from the storehouse, if properly classified there, and the handling by the respective wards and by the laundry. Some check could then be made on actual shortages.

The large production of the laundry at a minimum cost is sufficient justification for an additional expenditure of funds in order that the property of the hospital and the patients may be safeguarded and properly accounted for.

## (D) OUTSIDE ACTIVITIES

## 11. ENGINEERING DIVISION

The engineering division consists of the following units:

## (a) Power plant.

1. Steam engineering division.

2. Electrical engineering division.

## (b) Ice and refrigerating plant.

## (c) Pumping station water plant.

## (d) Steam fitting department.

## (e) Plumbing department.

## (f) Railroad system.

## (g) Machine shop.

## (h) Blacksmith shop.

## (i) Mechanical storehouse.

## (j) Fire department.

A chief engineer, who was full charge of the power plant and all associated engineering activities of the hospital, is in charge of this division. He has under his supervision 82 paid employees and an average of 19 patients. The paid employees work on eight-hour shifts, three such shifts being maintained each 24 hours on some of the activities. The patients work on an average of five and one-half hours a day and only on day shifts. The activities of the division extend to installations and repairs of a character such as usually come within the scope thereof, viz, operation, maintenance and repair of electrical and steam machinery, water, gas, sewer, electrical and internal telephone systems. A general storehouse and stockrooms are maintained, and each subdivision maintains the necessary workshops.

(a) *Power plant.*—The power plant, erected in 1904 at a cost of \$127,350 and having a 225-foot smokestack, is a high, one-story brick building with concrete roof and floor, containing 16,620 square feet of floor space. This building contains 12 high-pressure boilers for generating steam to run electric dynamos, to heat all buildings and to supply steam for ice-making machines, etc. Four of these boilers were installed in 1911, the others being installed in 1904, when the plant was built. Two underwriter fire pumps for a high-pressure system, having a capacity of 1,000 gallons of water per minute and capable of raising a pressure of 105 pounds in five seconds, which can be maintained for three lines of hose with 1½-inch tips, are located in a small room adjoining the power plant. A fire siren operated from the switchboard in the administration building is located in the engine room.

Coal delivered in cars brought in on trestles is dumped to the level of the firerooms and transferred by patients in wheelbarrows to an automatic conveyor, which carries it above the boilers inside the plant. There is also a small frame outside structure used as a weighing house, where coal cars are weighed before and after they are dumped and a complete record thereof kept.

All ashes are removed by motor trucks loaded by an ash chute equipped with a vacuum attachment. Various spray ponds are maintained in the rear of the power plant to cool water for condensing purposes and all wires and pipes leaving the power plant are inclosed in a concrete tunnel which leads to all buildings on the grounds. Control of the power plant is exercised through both the steam and electrical engineering divisions.

(1) *Steam engineering division.*—The steam engineering division is in charge of an assistant chief engineer, who, in the absence of the chief engineer, assumes charge of all related activities with the exception of those of the electrical engineering department. He directs the operation of the railroad, ice, and refrigerating plant, the pumping station water plant and the steam-fitting and plumbing departments. He writes specifications for steam, hydraulic, pneumatic, and refrigeration machinery, and maintains cost records of the power plant.

(2) *Electrical engineering.*—The electrical engineering division is in charge of an electrical engineer who plans extensions to and changes in the present electrical power, lighting, and telephone systems, prepares specifications, orders materials for and supervises the construction of all underground and interior electrical installations,

and cooperates with other departments of the hospital in preparation of specifications for electrically equipped machinery. The part of the power plant which contains the electrical machinery is under the supervision of the electrical engineer.

(b) *Ice and refrigerating plant.*—The ice and refrigerating plant, formerly a boiler house, is a very high, one-story, iron-trussed, stone building with wood and slate roof and concrete floor. It contains 4,500 square feet of floor space and is equipped with modern machinery. Refrigeration equal to that obtained from 5,800 tons of ice is provided by the plant. In addition, approximately 1,700 tons of ice at an approximate cost of \$2 a ton are manufactured each year. Of this amount, a small quantity is sold to doctors, officers, and employees living on the grounds at the rate of 40 cents per 100 pounds delivered to quarters.

(c) *Pumping station water plant.*—The pumping station water plant, which furnishes all water used in all buildings of the hospital, is in charge of an assistant engineer. The machinery is located in a high, one-story, brick building with slate roof located about one-third of a mile from the Potomac River and three-fourths of a mile from the power plant. This building contains 5,075 square feet of floor space and was erected in 1894 at a cost of \$21,425. An addition was made in 1902 and in 1912 all old-type boilers were taken out and electrical machinery installed. The present equipment consists of three air-compressing engines which force the water from nine artesian wells into two reservoirs having a capacity of approximately 350,000 gallons of water. There are four electric pumps, two of which pump water from these reservoirs into a large, 60,000-gallon, steel tank, 105 feet high, located in the center of the hospital grounds. This supplies the drinking water for the hospital. The other two pumps force water from a cistern, supplied by water from the river by means of a tunnel, to a large basin located in the central part of the grounds. The water from this basin flows by gravity and supplies the boilers in the power house. Water for fire purposes may be further augmented through the regular city mains.

(d) *Steam-fitting department.*—The steam-fitting department, in charge of a head steam-fitter, installs, maintains and repairs all classes of steam-fitting; installs and repairs brine and ammonia piping throughout the refrigeration system, and installs and keeps in repair the large steam mains in tunnels and all other steam lines throughout the institution. The workshop contains electrically-driven lathes, hydraulic trip hammers, hydraulic punches, drills, threading machines and all other necessary equipment.

(e) *Plumbing department.*—The plumbing department is charged with the installation, maintenance and repair of all classes of plumbing. The workshop contains electrically-driven threading machines, drills, acetylene torches and all other necessary equipment.

(f) *Railroad system.*—The railroad is in charge of the locomotive engineer, assisted in his work by the locomotive fireman. The equipment consists of one 50-ton locomotive and two dump or coal cars. The locomotive house is a high, one-story, frame building with a tin roof, located near the power plant and contains a small amount of machinery and a pit which are used in making necessary repairs to the engine. The track of the hospital railroad, about  $1\frac{1}{2}$  miles in length, connects the power plant and the pumping station with the Baltimore & Ohio Railroad sidetrack at Anacostia.

(g) *Machine shop*.—The machine shop, in charge of the chief machinist, is employed primarily in the repair work required at the hospital. The workshop contains electrically driven lathes, planers, hydraulic trip hammers, hydraulic punches, drills, threading machines, and other necessary equipment.

(h) *Blacksmith shop*.—In the blacksmith shop are made and installed new bolts, rods, ironwork, and tires for wagons; all tools, picks, shovels, hammers, harrows, carts, trucks, wagons, and all other farm implements are repaired and all horses owned by the hospital are shod. In this shop there are two forges, a press drill, several anvils, and other necessary equipment.

(i) *Mechanical storehouse*.—The mechanical storehouse is a two-story and basement, reinforced concrete building erected in 1920 at a cost of \$24,750, which provides space for the mechanical shops and storage facilities for mechanical and electrical supplies. The storekeeper inspects and maintains a record of the supplies and equipment purchased and used, including coal purchased and consumed by the hospital.

(j) *Fire department*.—The fire department is in charge of a chief who is on duty from 7.30 a. m. to 4 p. m. At night the electrician and plumber on duty at the time have charge of the fire department in addition to their regular work. The men on night duty at the power plant and 20 male nurses, who are required to live on the reservation to answer emergency calls, are available in case of a fire.

The engine house is located in the most thickly settled section of the grounds. The fire-fighting apparatus kept in the engine house consists of one fourth-class Metropolitan fire engine, a small hook ladder with an extension of 40 feet, four single ladders 12, 16, 20, and 24 foot lengths, one scaling and and pompier ladder, two five-gallon extinguishers, four hand-drawn reels, three containing 500 feet and one 200 feet of hose, and one hand-drawn coal cart. A motor-driven hose truck, one ladder, and 850 feet of hose are kept at the hospital garage. In addition, the several ward buildings are equipped with a total of about 5,000 feet of hose, 62 fire plugs, and 592 fire extinguishers.

Periodic fire drills are held in the wards and at the engine house for the purpose of training those in charge of the fire department to give quick response to fire calls and of instructing nurses and attendants, as well as patients, what to do in the event of a fire.

It was noted in connection with the fire department that the fire engine and hook ladder are horse drawn; that the stables where the horses are kept are one-half mile away; and that the largest ladder is 40 feet, while it would require one 65 feet long to reach to the top of the tallest building.

It is not believed that the hospital fire department furnishes adequate fire protection to the large number of patients housed in those building which are three and four stories high and constructed partly of wood, with narrow stairways and no other exits for use in case of fire.

The water available in case of fire appears adequate, in view of the possibility of connecting with the District of Columbia water system and the supply of water which is secured from the Potomac River.

A detailed inspection was made of St. Elizabeths Hospital by the deputy fire marshal of the District of Columbia in December, 1920,



for the purpose of determining how adequately the hospital was protected against fire hazards. A very detailed report of the inspection was made and submitted to the superintendent of the hospital. Some of the recommendations made in the report were adopted, but it appears probable from the investigation which this office has made that no action was taken relative to certain major recommendations. No other general inspection of the hospital for a similar purpose has since been made.

## 12. CONSTRUCTION DIVISION

The construction division is under the management of a superintendent of construction who has direct charge of the construction and repair of buildings, roads, walks, and sewers and of such activities as the carpenter, cabinet, paint, tin, and wheelwright shops. Each one of these activities is charged with general repair work as well as the manufacture of new equipment coming within its scope.

Material used in the repair shops, other than regular building material, such as brick, lumber, and cement is purchased from the bureau of supplies. The superintendent of construction furnishes monthly reports to the administration division, showing the cost of each project, material used, and number of men employed.

In addition to the regular paid force of 59 employed on this work there are 10 patients who work on an average of five and one-half hours daily.

## 13. GARAGE

The hospital garage is a one-story, concrete building with about 10,400 square feet of floor space and is equipped with a modern repair shop. The garage is in charge of a foreman who attends to securing the supplies and equipment necessary to operate automobiles and trucks owned by the institution. He maintains a record of each car or truck, such as the date of purchase, model, make and capacity, and looks after all repair work. In addition to the foreman there are 34 employees engaged at the garage, consisting of 4 mechanics, 1 mechanic's helper, 1 coach painter, and 28 chauffeurs.

The needs of the hospital require a daily delivery service, which is furnished by trucks and chauffeurs from the garage. The trucks assigned to the various deliveries and the number of garage employees on each truck are as follows:

	Men		Men
Ice truck.....	2	Messenger truck.....	1
Laundry truck.....	2	Bread and milk truck.....	1
Garbage truck.....	2	Vegetables and food stuffs.....	1
Grocery truck.....	1	Miscellaneous.....	1
Trash truck.....	2		

The hours of duty of the men on the bread and milk and the vegetable trucks are from 6.30 a. m. to 2.30 p. m. From 2.30 p. m. to 4 p. m. they are relieved by other drivers.

The motor equipment under the supervision of the garage is as follows:

Make	Body	Number
General Motors Corporation.	Ambulance (10 passengers each).....	2
Do.	Delivery trucks.....	7
Do.	Hose cart (part of fire equipment).....	1
Ford.	Sedans.....	2
Do.	Trucks with dump bodies.....	2
Do.	Truck equipped with concrete mixer.....	1
Do.	Truck (garbage).....	1
Do.	Ambulance, turned over by Public Health Service June 24, 1924.....	1
Do.	Truck body, turned over by Public Health Service June 24, 1924.....	1
Hudson.	Limousines, turned over by Army, 1920.....	2
Packard.	Limousine, property of Interior Department.....	1
Graham.	Trucks.....	2
Autocar.	Do.....	2
Do.	Truck with dump body.....	1
Detroit Electric.	Brougham (used by superintendent and kept up by electrical department).....	1
Fordson Tractors.	Do.....	3
Do.	Garage, equipped with snow plow.....	1
Farmall Tractor.	Hospital farm.....	1

After the war period several cars were turned over to the hospital by the War Department and the Public Health Service. Most of these cars have since been traded for others so that only two Hudson limousines and 10 General Motors Corporation trucks remain from those turned over by the War Department and the Ford truck and ambulance remain from those turned over by the Public Health Service.

Several privately owned cars are stored in the garage belonging to the superintendent, the assistant superintendent, the clinical director, and the superintendent of the garage. No work of any character is done on these cars by the mechanics in the garage and no supplies are furnished.

Gasoline and oil are ordered, as are all other supplies, through the General Supply Committee and delivered to the garage in 1,000-gallon lots in tank wagons and stored in underground tanks outside of the garage. These are requisitioned by the various branches of the hospital as required and a complete record kept of distribution.

#### 14. FARMING OPERATIONS

(a) *Farms and gardens.*—Approximately 450 of the 803.37 acres of land owned by the institution are under cultivation, divided as follows:

	Acres
Blagden farm.....	62.25
Shepherd farm.....	150.00
Stevens farm.....	59.69
Godding Croft farm.....	175.00
Total.....	446.94

In addition to this the Department of Agriculture grants permission for the cultivation of 25 acres of reclaimed land along the river.

In the planning and cultivation of this land approximately 40 employees and 51 patients are used. The barn located on the Stevens farm houses 22 horses and furnishes storage for hay, straw, and grain. There are also many tool sheds.

The Godding Croft farm, located in Maryland, on Oxen Run Creek, is operated more or less as an independent unit. It has its own buildings, equipment, and labor. Its products are consumed almost entirely on the farm. The farmhouse which was on the farm when purchased has been made habitable for use as quarters for farm employees and patients doing farm work. The old brick stable and some of the outbuildings are out of repair, and will soon need to be replaced. A new silo of approximately 220 tons has just been completed.

During 1925 there were produced forage and grain as follows:

Ear corn.....	bushels..	1,000	Clover hay.....	tons..	8
Corn fodder.....	tons..	80	Oats hay.....	do....	8
Corn, cut green.....	do....	20	Cowpea hay.....	do....	75
Wheat, cut green.....	do....	12	Alfalfa hay.....	do....	10
Timothy hay.....	do....	40	Rye straw (bedding).....	do....	20

The season's crops consisted of 30 acres of corn for seed and grain, 20 acres for ensilage, and 130 acres for various crops of hay. In addition, vegetables were grown for consumption on the farm, any surplus being sent to the hospital. There are pastured here 86 calves and heifers, 2 bulls, and 8 farm horses.

The Stevens farm produces vegetables and silage corn. Since July 1, 1925, there have been produced for the hospital and dairy 225 bushels peas; 144 barrels beans, string; 130 barrels spinach; 396 barrels cabbage; 35,520 pounds potatoes, Irish; 37,782 ears corn, sweet; 14,352 cucumbers; 21,549 summer squash, with the following crops harvested the latter part of 1926: 5 acres of soya beans and Sudan grass mixed for soiling; 16 acres corn for ensilage; 5 acres sweet corn, the stalks to be made into ensilage as soon as the ears are removed.

Cabbage, early and late, summer squash, string beans, Lima beans, and other vegetables were also produced.

The Shepherd farm is used to grow succulent crops for the dairy and some potatoes and pumpkins, the following being harvested during 1925: 400 tons of corn ensilage, 70 tons of green wheat, 30 tons of green oats, 5 tons of green clover, 203 bushels of Lima beans, and 4,611 pumpkins, and there were harvested in 1926: 5 acres of Sudan grass, 5 acres of Irish potatoes, 35 acres of corn for ensilage, 3 acres of pumpkins, and 10 acres of sweet clover (two crops).

*The river land.*—The tract of 25 acres of reclaimed land just north of the Pennsylvania Avenue Bridge, secured from the Department of Agriculture, was planted with corn for silage.

The garden located on the Blagden tract near the pumping station delivered to the hospital in 1925 170 bushels of peppers, 641 bushels of tomatoes, 76 bushels of tomatoes, green; 681 bushels of parsnips, 60 bushels of oyster plant, 20,400 bushels of onions, 8,127 bushels of beets, 5,135 bushels of parsley, 10,567 bushels of carrots, 18,470 bushels of radishes, 307 heads of celery, 7,780 heads of lettuce, 76 watermelons, 2,710 cantaloupes, and 963 eggplants.

Similar items exclusive of watermelons and cantaloupes were grown in 1926.

(b) *Dairy.*—An average of 170 cows produced 206,794 gallons of milk in 1925. In addition to these cows there are kept on the Stevens farm about 30 dry cows, 6 bulls, and 48 calves. At Godding Croft nearly 100 heifers and 2 bulls were being pastured.

Approximately 22 employees and 50 patients work directly in connection with the dairy.

The buildings of the dairy consist of one large cow stable used for dry cows and calves and storage space for hay fodder and grain; two large stables with 100 stalls each, used for milch cows; two large silos for green feed, and necessary small buildings. The stables are equipped with manure conveyor and pit. Rooms for temporary storage and weighing of milk are located in the stables in which are kept the milch cows. These buildings are equipped with modern conveniences and are electrically lighted.

(c) The piggery delivered in 12 months 109,656 pounds of fresh pork and 1,134 pounds of liver, the stock on hand at the end of two fiscal years being as follows:

	June 30, 1925	June 30, 1926
Hogs.....	238	226
Boars.....	6	9
Brood sows.....	72	67
Shoats.....	170	
Young pigs.....	25	290

One hundred pigs and two purebred Duroc boars were purchased during the year. Two large frame sheds with necessary runways are used to house the livestock of the piggery. A scalding tank and a chilling room are located at the building where the killing is done.

(d) The poultry farm, located at Godding Croft, has delivered to the hospital during the year 10,182 dozen eggs and 3,098 pounds of dressed poultry. A comparison of the flocks on June 30, 1925, and June 30, 1926, follows:

	June 30, 1925	June 30, 1926
Laying hens.....	2,934	2,358
Chickens.....	587	2,159
Roosters.....	116	57

Last spring 2,000 purebred white leghorn chicks were added to the flock. The buildings include a large house 500 feet long, 8 brooding houses, an incubator house, and necessary runways.

#### 15. ORCHARD, VINEYARD, GREENHOUSES, AND LAWNS

The 400 fruit trees on the Blagden tract and the 110 at Godding Croft produced during the fiscal year 1925, 365 bushels of apples; in 1926, 189 bushels; and in 1927, 870 bushels of apples, 400 bushels of pears, and 150 quarts of figs.

The vineyard on the Blagden Farm of about 15 acres, with its 1,500 grapevines, produced for hospital use during the fiscal year 1925, 16,680 pounds of grapes; in 1926, 6,600 pounds; and in 1927, 17,716 pounds.

The greenhouses are situated on the Blagden Farm and are six in number. Here are raised the plants for setting the 50 flower beds and gardens around the grounds, for which 44,932 plants were produced in 1926. Besides these, 2,224 potted plants and 59,086 cut



flowers were produced for use in the wards and buildings of the hospital.

There are approximately 25 acres of lawn to be kept free of papers, rubbish, and leaves. The foreman gardener, assisted by 12 employees and 5 patients, cares for the vineyard, greenhouses, lawns, and grounds and collects condemned material such as rags, iron, lead, brass, aluminum, and waste paper, which is disposed of through the General Supply Committee.

### (E) MISCELLANEOUS ACTIVITIES

#### 16. WATCH FORCE

The watch force has general supervision over the entire hospital reservation for the purpose of maintaining law and order thereon. It is intended that this force shall keep a strict watch over all persons who enter and leave the hospital, prevent the escape of patients, carefully scrutinize all conveyances leaving the reservation, direct visitors to the proper buildings, and give any other necessary information.

There are three main entrances to the hospital grounds, viz, the first gate, second gate, and third gate. The first and second gates are the entrances to the main part of the hospital grounds, while the third gate is the entrance to the Richardson group buildings. At each of these gates there is a small house which is used by the watchman on duty and as a waiting room for the public.

The watch force on duty at the three gates and their hours of duty are as follows:

*First gate (open all night).*—One watchman on day shift from 8 a. m. to 4 p. m.; one watchman on evening shift from 4 p. m. to 12 m.; and one watchman on night shift from 12 m. to 8 a. m.

*Second gate (closed from 6 p. m. to 6 a. m.).*—One watchman on day shift from 6 a. m. to 2 p. m.; a patient on duty from 2 p. m. to 4 p. m.; the ground policeman on duty from 4 p. m. to 6 p. m.

*Third gate (closed from 12 m. to 5 a. m.).*—A teamster from farm on duty from 8 a. m. to 4 p. m.; one watchman on duty from 4 p. m. to 12 m.; A ground policeman on duty from 5 a. m. to 8 a. m.

The captain of the watch force polices the grounds from 8 a. m. to 4 p. m.; on the evening shift from 4 p. m. to 12 m. there is one man policing the grounds, two hours of whose time, from 4 p. m. to 6 p. m., are spent at the second gate. On the night shift from 12 m. to 8 a. m. there is also one man policing the grounds, three hours of whose time, from 5 a. m. to 8 a. m., are spent at the third gate. There is an employee detailed from the construction division to the watch force who works in the place of regular watchmen having time off or taking their vacation.

#### 17. CEMETERIES

There are three cemeteries in different parts of the hospital grounds where patients are buried when their families do not request burial elsewhere. Two of these cemeteries are located in the southeastern corner of the reservation and are separated by a road leading from the hospital grounds. The other, which is filled and not used, is located near the railroad tract in the vicinity of the pumping station.

A cemetery sexton, who is commissioned a special officer on the Metropolitan police force, lives near the cemetery grounds and acts

as a watchman. He superintends the burial of all bodies and keeps complete records of same. Necessary laborers are detailed to the cemetery to assist in the work. On Decoration Day and some other holidays the graves are decorated with flowers furnished by hospital greenhouse.

There are approximately 4,000 bodies buried in the three cemeteries, of which approximately 2,000 are military. The graves of former soldiers, sailors, and marines are marked with a marble stone furnished by the War and Navy Departments. Other graves are not marked, but a complete record of each grave is kept in the office by means of maps and diagrams which show the number of each grave, location, and the name of the person buried therein.

#### **IX. THE RECEIVING, SAFEGUARDING, AND DISPOSITION OF FUNDS AND PROPERTY OF PATIENTS**

The report on the receiving, safeguarding, and disposition of funds and property of patients is treated under the following heads:

1. Procedure governing the receipt, care, and purchase of clothes for patients.
2. Receipt of property by chief clerk.
3. Care of property in the custody of chief clerk.
4. Inventory of property in the custody of chief clerk.
5. Results and findings of inventory.
6. Military discharges and other valuable papers.
7. Money accounts of patients: (a) General summary; (b) pension accounts; (c) personal accounts.

##### **(1) CLOTHING OF PATIENTS**

On admission the clothes accompanying each patient are inspected and listed by the supervisor of the receiving ward.

(a) A list is made on a card and in a record book maintained by supervisors in all departments.

(b) Clothing required by the patient for immediate use is marked with the name of the patient by the receiving supervisor.

(c) Clothing not required for immediate use is not marked but placed in storage.

When a patient is moved to another ward his or her clothes, accompanied by the original list, are also transferred. Responsibility for properly effecting these transfers rests with the supervisors of departments concerned.

(a) The supervisor of the department from which the patient is transferred, on surrendering clothes and list, requires the receiving supervisor to acknowledge receipt therefor in the record book.

(b) The supervisor on the service to which a patient is transferred records the clothes for which he has acknowledged receipt in the book he maintains for that purpose.

Clothes worn out, condemned, or destroyed are recorded by appropriate entry on both the card and in book record maintained by supervisors.

No record is kept by supervisors of clothes sent to or received from the laundry. When shortages in a patient's apparel are noted, the supervisor or an assistant searches for the missing pieces in the

unidentified items segregated by the laundry. If not found, such pieces are recorded as lost.

Clothes acquired by patients while in the hospital through whatever manner are listed on both card and book records by the supervisor of service to which patient is assigned. It is the practice also to mark such clothes with the name of the patient upon receipt.

Patients whose condition will not permit them to purchase such clothes as are necessary and who do not have a guardian for that purpose are assisted by the hospital as follows:

(a) A list is made every spring and fall by the charge nurse of a patient's clothing needs. This list is usually verified by the supervisor.

(b) A list of needs is then sent to the finance officer who indicates the amount that a particular patient may spend for clothing. The amount to be expended is usually predicated upon the amount available to the patient.

(c) Upon return of the list indicating amount that may be expended, the supervisor prepares "obligation authorization" addressed to the dealer.

(d) If patient, by reason of his condition, is unable to accompany supervisor or attendant designated by him to make purchases, selections are made for him.

(e) On the other hand, if the patient is able he accompanies the supervisor to the city and makes his own selections.

(f) Men's clothing is usually purchased from Herzog's, Bieber-Kaufman, or Saks & Co., as these merchants give the patients a discount, understand the procedures of the hospital respecting bills, etc., and do not object to having the patients in their stores. The patients, however, may select their own shops.

Patients with city parole make their own purchases and are permitted to draw funds for that purpose.

## (2) RECEIPT OF PROPERTY BY CHIEF CLERK

On admission patients are examined and all property found on their person or in their effects is taken by the supervisors of the respective receiving wards and listed. Property of value is required to be turned over to the chief clerk who gives proper receipt for same. Property of this nature is usually sent direct to the chief clerk in cases where patients are committed from other institutions. The chief clerk is the designated custodian of all valuable property.

## (3) CARE OF PROPERTY IN OFFICE OF CHIEF CLERK

For many years prior to the appointment of a new chief clerk in February, 1926, the property, as well as the records, was kept in a very loose and careless manner. Property, when received by the chief clerk, was recorded in a book. On many pages no date whatever of the receipt of property is recorded. In most instances the case number of the patient is omitted. When property was returned to patient, guardian, or relative, an indorsement across the face of the entry, "Delivered," without notation as to whom delivery was made or the date of delivery, occurs frequently. For example, case No. 29528 deposited on April 7, 1922, one Liberty bond for \$100

at the receiving ward. This bond was traced to the office of the chief clerk and found to be entered on property book without date. An indorsement appears on the face of the entry, "Sent to \* \* \* August 30, 1924," in lead pencil. The name of the person to whom delivered is illegible and it is impossible to determine from the record to whom the bond was delivered or sent. Recourse to the general file in this case discloses no reference whatever to the disposition of the bond.

The effects of patients, in many instances, were found insecurely wrapped and thrown into lettered bins. Some of the property, mostly of men patients, was found stored in bins in the vault adjoining the financial office. This vault is locked at night, but is open during the day and is accessible to all the office force. The bins where the property is stored are inclosed with ordinary wood panel doors, with ordinary cupboard locks fitted with common barrel keys. These doors are locked and the keys kept in the office of the chief clerk. The rest of the property is in a built-in cupboard in the office of the chief clerk. This cupboard or case is built of wood, with ordinary panel doors and fastened like an ordinary cupboard. In addition to a portion of patients' effects, there is kept in this case miscellaneous office supplies which are accessible at all times to the chief clerk and assistants in his office.

#### (4) INVENTORY OF PROPERTY IN CUSTODY OF CHIEF CLERK

Until the appointment of a new chief clerk in February, 1926, no attempts appear to have been made to take an inventory of patients' property.

Investigation disclosed, however, that an inventory had been undertaken by the new chief clerk of the property in the custody of the retiring chief clerk. This work had proceeded to about one-third of the total. The work thus far done was checked by investigators and values appraised. Record of the inventory was made on cards. The work was taken up by investigators where the chief clerk left off and a complete inventory has been made of all property and effects belonging to patients in the custody of the chief clerk, with appraised values. To all inventory cards have been added the case number, the present status of the patient, i. e., whether dead, discharged, or still in the hospital. Much of the property has been placed in cotton bags, tied up, and labeled with name and case number of the patient. The storage place is indicated on the card.

Marked improvement is now being shown in the care and handling of this property. Some valuable packages have been placed in the steel safe in the financial office. There is, however, room for improvement in the safeguarding of this property. It should all be more securely protected from fire, theft, and deterioration.

#### (5) RESULTS AND FINDINGS OF INVENTORY

##### *Summary*

Number of accounts examined and inventoried.....	1,785
(a) Estimated value of property found.....	\$20,379.49
(b) Estimated value of bank balances as disclosed by bank books found.....	\$131,954.29
(c) Face value of Liberty bonds found.....	\$1,500.00
(d) Checks, drafts, money orders, unindorsed.....	\$6,476.23



(e) Certificates of deposit.....	\$1, 774. 09
(f) Postal and War Savings certificates.....	\$861. 00
(g) Adjusted compensation certificates.....	\$83, 831. 00
(h) Building association stock.....	\$910. 65
(i) Insurance policies, face value.....	\$35, 285. 00
(j) Shares of stock in various corporations.....	11, 207
(k) Foreign exchange, drachmas (Greek).....	6, 232
(l) Isle de Cuba bonds (three 500-peso).....	pesos-- 1, 500
(m) Republic of Argentine (2 bonds of 500 francs).....	francs-- 1, 000
(n) French industrial bonds (79 bonds).....	do--- 39, 500

Explanations of these items follow:

(a) This represents the values placed on the property, consisting principally of jewelry and watches, by the investigators.

(b) Bank books examined disclose deposits and balances aggregating this sum. There is no way of determining whether these balances have subsequently been withdrawn except recourse to the banks direct.

(c) In some instances it was found that Liberty bonds had been cashed and coupons clipped. The proceeds, however, were traced to the credit of the patient's money account. The \$1,500 found is represented by a number of small holdings.

(d) This represents principally Government checks, money orders, drafts, cashiers' checks of other institutions, which, it is claimed, the patients refused to indorse or were not competent to indorse, consequently they have not been credited to the patients' money accounts, but are still in the custody of the chief clerk. Many of these checks are out of date and can not now be collected in the regular course.

(e) This represents certificates of deposit in various banks and Government agencies authorized to receive deposits.

(f) This represents payments on Postal Savings and war savings subscription certificates.

(g) Adjusted compensation certificates issued by the United States Veterans' Bureau were found in the custody of the chief clerk in the sum stated (\$83,831).

(h) This represents stock and deposits in a building association of long standing and there is no evidence of redemption or cancellation.

(i) Insurance policies in various companies, including the war-risk insurance department, were found, aggregating the face value of \$35,285. There is no way of determining their value except through recourse to the companies involved.

(j to n, inclusive) There is no way of determining the value of the stocks and bonds found without taking up each with the companies and agencies involved. The item of exchange was purchased from a local bank of Washington, D. C., and the value could be ascertained by reference to said bank.

*General.*—There has been no attempt to segregate the valuable articles from those that are intrinsically worthless except in most recent cases. In fact the chief clerk had no idea of the value of the property for which he was responsible, except those cases actually received by him since March 1, 1926. An immediate inventory is now made of all property received daily, but no attempt at valuation is made.

One package, in particular, was found in the steel safe containing jewelry and diamonds appraised by investigators at approximately \$10,000. The chief clerk is not under bond, and it would seem that

the hospital and the Government should relieve itself of the responsibility of care of all property where possible; that is, where legal guardians have been appointed. On the other hand, adequate protection should be provided for the safeguarding and care of property until so delivered and where there are no legal representatives to look after the affairs of patients. There is now, and always has been ample opportunity for theft, loss, and substitution.

There is no way of checking up the property on hand with the records as formerly kept, and no way of telling by the old record what should be on hand. The inventory of property actually found has been set up without check or reference to the old record books.

There are hundreds of small articles which had become separated from their original packages and are now thrown into one bag. Nothing of real value was found in this lot.

#### (6) DISCHARGES AND OTHER PAPERS

There are 3,000 envelopes containing discharges from various branches of the naval and military services. The majority of these are now stored in steel cases in the file room on the second floor of the administration building (A Building) under the care of the chief clerk, the rest being stored in various other places. Examination of these records discloses, in many instances, that there are among them papers having an actual monetary value, such as final statements of discharged and enlisted men, receipts for deposits, and adjusted compensation certificates, a list of which is in course of preparation.

These papers go back to the beginning of the hospital, and it was necessary to examine all of them in order to determine whether anything of value other than the service certificate and discharge was contained therein.

No uniform system was ever adopted for keeping these certificates and papers. Recently they have been listed alphabetically without any reference to case number, and if called for by name most of them could now be found. This could not have been the condition existing formerly, as it is only very recently that these records have been taken from the basement and sorted out in some uniform manner.

#### (7) PATIENTS' MONEY ACCOUNTS

##### (A) SUMMARY

The money accounts of patients are kept by the disbursing officer of the hospital. They are divided into two classes, namely, pension accounts, and personal accounts.

Inactive pension accounts, 70; balances, June 30, 1926.....	\$147, 107. 19
Active pension accounts, 183; balances, June 30, 1926.....	395, 287. 01
Total pension accounts, 253; total balances, June 30, 1926..	<u>542, 394. 20</u>
Inactive personal accounts, 1,084; balances, June 30, 1926.....	37, 873. 63
Active personal accounts, 1,353; balances, June 30, 1926.....	191, 887. 44
Total personal accounts, 2,437; total balances, June 30, 1926.....	<u>229, 761. 07</u>
Grand total, accounts, 2,690; grand total, balances, June 30, 1926.....	<u>772, 155. 27</u>

## (B) PENSION ACCOUNTS

When a pensioner of the Government is committed to the hospital from other institutions, his money accounts are transferred to the hospital; that is, the money that the other institution may have had belonging to him. His succeeding pension payments and other funds thereafter come direct to the hospital. A card account is kept with each patient showing the receipt of pension funds, posted under the several divisions in accordance with regulations promulgated under date of May 1, 1909, based on the acts of February 20, 1905, and February 2, 1909. This account shows the disposition of funds and the balance to the credit, if any, under each heading.

From the amount set aside for the pensioners, benefit payments are made to each of them twice each month on regular pay rolls prepared by the supervisors of the respective wards, in duplicate. These pay rolls are audited by the disbursing officer and the money placed in envelopes and delivered to the respective supervisors and receipt taken from them, for the total, by the disbursing officer.

The supervisors make the distribution to the patients, taking their individual receipts. In cases where patients are not competent to sign, the money is receipted for by the physician in charge. The money for relatives is sent to them monthly by check of the disbursing officer.

Where no relative is indicated on the account, that portion ordinarily set aside for such purpose is added to the portion set aside for board of patient.

The portion set aside for board can not be used by the hospital except within the fiscal years accumulated.

For many years the hospital has not exercised its prerogative in the use of these funds without special authorization of Congress, for fear that some relative might appear and claim the relative's share. If the fund were used and such a contingency should arise, the hospital would be without funds with which to pay relatives, hence it has been the practice of the hospital to allow the sums set aside for board to accumulate, especially that portion represented in the amounts which would ordinarily be set off to the credit of relatives had such relatives appeared. From time to time amounts from these accumulations have been applied to uses of the hospital by special acts of Congress, notably:

June 17, 1922. Buildings and grounds.....	\$90,006.93
Nov. 17, 1922. Buildings and grounds.....	38,493.07
June 23, 1924. Power, heat, and lighting plant.....	50,750.80
Dec. 2, 1924. Power, heat, and lighting plant.....	123,787.83
Feb. 7, 1925. Power, heat, and lighting plant.....	37,858.09
Total.....	340,896.72

A statement showing amounts transferred to support of hospital, for buildings and grounds, and for remodeling and extending power, heat, and lighting plant from July 1, 1916, to June 30, 1926, has been prepared, also a statement showing the balances applicable to patients in the hospital on June 30, 1926, as well as those who had been discharged or had died prior to June 30, 1926, and who had unsettled balances to their credit.

All pension accounts have been verified and balances as submitted in the report of the disbursing officer for the fiscal period ended June 30, 1926, found correct.

It would seem advisable to have the legislation amended with respect to the accumulated board money in order that the hospital might be able to draw on it without special act of Congress in time of need or special emergencies. Under present conditions the money, while earned, can not be used without special act of Congress except in cases where it is positively known there are no relatives, and then only within the fiscal year accumulated.

#### (C) PERSONAL MONEY ACCOUNTS OF PATIENTS

A few of the pensioners have money accounts separate and apart from their pension accounts, which are included herein.

The sources of money for a patient are various. Frequently he has money on his person when admitted. His final pay is sent in many cases, and frequently he has compensation and allowances from the United States Veterans' Bureau. Deposits are made by relatives and guardian for personal uses and comforts and for clothing. All sums so received are turned in to the disbursing officer, who keeps a card account of each patient.

These accounts have been checked and verified with the abstract of accounts submitted by the disbursing officer for the fiscal period ended June 30, 1926. A statement or practical transcript of the active accounts for the period June 30, 1916, to June 30, 1926, has been prepared.

Purchases of clothing have been examined and compared with the receipted bills of various vendors for four years prior to June 30, 1926. Discounts have been allowed and availed of in most cases, and the patients' accounts have been credited with all discounts allowed.

Patients are paid from their personal funds small sums twice each month on approved pay rolls in like manner as described in payments to pensioners.

The accumulated balances of deceased patients are transferred to the credit of "Miscellaneous receipts" of the Treasury if not claimed by relatives within five years after death of patient. The accumulated balances of patients having eloped or otherwise escaped from the hospital are turned in to "Miscellaneous receipts" of the Treasury after seven years. These balances are carried under the caption of "Inactive personal accounts" and a statement of transfers has been made for the period under investigation, July 1, 1917, to June 30, 1926.

In most cases where guardians have been appointed, funds which heretofore had come direct to the hospital come through the guardian. Likewise, clothing is purchased by the guardian. There is, therefore, no opportunity in this examination to investigate the application and use of patients' funds in the hands of such guardian or committee.

#### X. "RECEIPTS AND EXPENDITURES AND USES OF APPROPRIATIONS," INCLUDING THE USE OF PROPERTY

The hospital has not maintained during the past 10 years such a cost-keeping system or such classified accounts of expenditures as would permit the compilation therefrom of comprehensive statements



indicating the uses which have been made of regular appropriations and other funds made available for expenditure by the hospital.

The figures which are furnished by the hospital in connection with the estimates for appropriations being based on an objective classification of purchases indicate only in a general way, except for a limited number of items, the time when actually used or the specific purposes to which such purchases have been put.

It is possible that the records maintained, which are voluminous and detailed, are sufficient to enable the administrative officer thoroughly familiar with all the details to exercise a rough-and-ready supervision of expenditures. They have not permitted of direct compilation into comprehensive statements, nor have they been so maintained as to indicate the cost of the various functions of the hospital, nor have they indicated the amount which has been expended each year to cover unexplained and possibly controllable losses of clothing, bedding, and other similar items of considerable value.

As an example, a test check on the inventories and issues of white and gray blankets, pillowcases, single sheets, and bath towels has been made for the period June 30, 1922, to June 30, 1926, which shows the following results:

*Statement of blankets, pillowcases, single sheets, and bath towels for period of four years, June 30, 1922, to June 30, 1926*

	White blankets	Gray blankets	Pillow- cases	Single sheets	Bath towels
June 30, 1922. Inventory in wards.....	2,540	9,378	12,369	22,102	6,835
June 30, 1923. Issued to wards.....	520	2,959	7,387	11,842	10,648
June 30, 1924. Issued to wards.....	314	3,722	7,996	10,928	11,940
June 30, 1925. Issued to wards.....	99	3,806	8,006	11,074	10,147
June 30, 1926. Issued to wards.....	195	4,234	7,863	13,058	10,458
Total.....	3,668	24,099	43,621	69,004	50,028
June 30, 1926. Inventory in wards and re- pair shop.....	2,409	10,910	12,055	24,930	6,966
Used in 4 years.....	1,259	13,189	31,566	44,074	43,062
Accounted for by condemnation.....	350	6,350	12,061	19,522	11,629
Not accounted for.....	909	6,839	19,505	24,552	31,433
Total used in 4 years.....	1,259	13,189	31,566	44,074	43,062
Price.....	\$5.00	\$2.50	\$0.36	\$0.91	\$0.20
Value.....	6,295.00	32,972.50	11,363.76	40,117.54	8,612.40
Average cost a year (one-fourth).....	1,573.75	8,243.12	2,840.94	10,029.38	2,153.10

Total average cost a year for the articles accounted for is..... \$10,514.45  
Total average cost a year for the articles unaccounted for is..... 14,325.85

In view of the apparently large consumption of the articles tested, to say nothing of clothing for patients, bedspreads, double sheets, and table linen, greater care and supervision should be exercised in the handling of this property.

While the control of the use to which clothing, bedding, and other similar items is put after issue leaves much to be desired, the method of controlling the inspection and receipt of items purchased insures that all property paid for is received into the storehouse and issued therefrom only in the manner authorized.

There have been prepared, to comply with the terms of the House resolution, statements showing the sources from which the hospital

derived the funds made available for expenditure and classified statements of expenditures for the various functions of the hospital.

The total amount of money made available to the hospital for expenditure during the 10-year period ended June 30, 1926, as shown by the records, was \$21,277,297.45, of which \$20,642,810.07 was expended.

Other than specific appropriations, the following amounts received seem to justify special mention:

One hundred and thirty-seven thousand and forty-one dollars was received from the United States Veterans' Bureau during the fiscal years 1924, 1925, and 1926 for the care and treatment of that bureau's patients, while \$967,877.43 was received for the board of such patients.

During the 10-year period the District of Columbia paid \$8,293,213.27 for the maintenance of patients committed to the hospital from the District of Columbia. To what extent the District of Columbia has been reimbursed for these expenditures from estates of patients has not been ascertained.

For support of Public Health Service patients there was collected \$358,190.20 and for Soldiers' Home patients \$62,276.60.

There was also collected for board of pensioners and used to reimburse support of the hospital the sum of \$146,012.36. In addition, the use of the accumulated funds of pensioners was authorized for the construction of an isolation building, a laboratory building, and extensions to the power plant. The amount made available for these purposes, \$340,896.72, was derived from accumulated personal funds of pensioners not used for board during the fiscal year for which ordinarily available and from funds of such pensioners available to the hospital only when not claimed by relatives.

A total of \$18,311,616.62 was expended during the 10-year period for the current support of the hospital; \$468,258.57 for the purchase of miscellaneous equipment from the support appropriation; \$4,201.60 from the appropriation for buildings and grounds; \$845,518.87 for maintenance and repair, except for an indeterminate amount used for extensions; and \$764,414.71 for the construction of new buildings, for additions to buildings, and for other extensions and improvements.

The act of Congress approved August 24, 1912 (37 Stat. 461), contains the following provision:

Hereafter in determining the per capita cost of maintenance and treatment of patients in the Government Hospital for the Insane the expenditures for repairs of buildings, roadways, and walks shall be included.

The computation following pertaining to the fiscal year 1926 has been submitted by the hospital as illustrating the method used in determining costs in conformity with the provision of law above quoted:

Expenditures (not disbursements) from—

Support, 1926.....	\$2, 636, 708. 23
Buildings and grounds, 1926.....	112, 905. 64
	<hr/>
	2, 749, 613. 87

Deductions		\$234,563.06
Equipment purchased	\$81,973.26	
Increase in inventory of supplies	73,594.52	
Estimated inventory, June 30, 1926	\$428,912.01	
Inventory June 30, 1925	355,317.49	
Reimbursable receipts for fiscal year (computed to Aug. 31, 1926)	78,995.28	
Board, other	\$30,151.64	
Cafeteria, sales	41,944.36	
Occupational sales	1,471.80	
Miscellaneous sales	5,210.17	
September items	217.31	
Balance used as total cost for fiscal year 1926		2,515,050.81

This amount of \$2,515,050.81 divided by the estimated average number of patients in the hospital during the year, 4,403, gives \$571.21 as an estimated cost per year per patient. The cost per year per patient, divided by 365 days, gives \$1.56 as the cost per day per patient.

The method of computation includes small items of permanent construction such as gate houses constructed at the hospital, extensions to sidewalks, if any, but fails to include the cost of replacing certain items of equipment such as motor vehicles, laundry equipment, etc.

The following is a schedule of rates charged for the care and treatment of patients in St. Elizabeths Hospital for the periods indicated:

	Per week	Per day	Per year
November, 1904, to Aug. 23, 1912	\$4.23		\$220.00
Aug. 24, 1912, to June 30, 1916	4.61		240.00
July 1, 1916, to Sept. 30, 1916	4.90		255.00
Oct. 1, 1916, to Sept. 30, 1917		\$0.70	255.00
Oct. 1, 1917, to July 31, 1919		.82	299.30
Aug. 1, 1919, to June 30, 1920		1.456	532.90
July 1, 1920, to June 30, 1922		1.46	532.90
July 1, 1922, to June 30, 1924		1.40	511.00
July 1, 1924, to Nov. 30, 1926		1.50	547.50
Dec. 1, 1926, to —		1.65	602.25

The schedule shows that in making charges, not only for the entire fiscal year 1926 but also up to December 1, 1926, the rate used has been \$1.50, instead of \$1.56 computed as previously set forth. The results so far as the District of Columbia is concerned is that the District has not paid the average cost of care and treatment of District patients on the basis upon which the computations are made and has not paid its share of the cost of replacing equipment or of the amount expended for "Increase of compensation" prior to the passage of the classification act and practically no part of the permanent construction cost, and, on the other hand, has received no credit for the work performed by patient labor for the hospital (this work is almost entirely done by District patients), or for the possibly lesser average expenses incurred on account of District patients who are usually indigent.

#### XI. "THE EXTENT AND MANNER IN WHICH OFFICIALS THEREOF HAVE PERFORMED THEIR DUTIES"

The extent and manner in which officials of the hospital have performed their duties is indicated very largely by the data submitted with respect to the various activities of the hospital. In order to

secure certain information as to the duties of the superintendent and medical officers, a questionnaire was submitted to each one with the request that same be answered under oath. One question was included for the purpose of ascertaining what, if any, services were performed by these officials outside their regular work, viz, "Do you engage in the practice of medicine or surgery, giving expert or professional testimony, or any other work in addition to your regular duties at St. Elizabeths Hospital? If so, give full details, including a statement of approximate time devoted thereto and revenues received therefrom."

The superintendent, in answer to the foregoing question, stated that he was occasionally called into outside consultations, had given expert testimony twice in the past six or more years, had on various occasions addressed scientific and civic organizations and State legislatures, and had written scientific books. He stated that the revenues received for these services, including royalties on books, averaged from \$2,000 to \$4,000 annually. It was considered necessary to ask this question of the superintendent, especially in view of the provisions of law hereinbefore quoted making it the duty of the superintendent to "devote his whole time to the welfare of the institution."

Of the 34 doctors at the hospital whose employment began prior to June 30, 1926, eight stated that they engaged in some outside practice, only two stating that the compensation received therefrom was in excess of \$500 per annum.

Reference has been made elsewhere as to the policy of the officials of the hospital to extend its scope so far as possible to cover the study, care, and treatment of all classes of mental illness. It should also be stated that a uniform impression was made that there was an apparent desire on the part of the hospital authorities to manage its affairs, both business and medical, in the most businesslike and scientific way. It appeared, however, that business control should extend over a little farther into the medical side and force the maintenance of more completely classified cost and expenditure accounts, a control of property after issue to wards, and possibly a more centralized control of leave granted to employees.

## **XII. CONTACT OFFICERS OF OTHER SERVICES**

### **(1) NAVY CONTACT OFFICE**

The Navy Department maintains an office on the second floor, administration building, St. Elizabeths Hospital. A commissioned officer of the Medical Corps of the Navy has supervisory control of the office, in addition to his duties as psychiatrist in the psychopathic ward of the Navy Hospital, Washington, D. C. A chief pharmacist's mate of the Navy is assigned to permanent duty at this office and attends to the routine and paper work.

The following statement was made as to the duties of the latter:

To visit all Navy and marine patients still in active service, all retired officers or retired enlisted men patients, and all Fleet Naval Reserve patients, committed to St. Elizabeths Hospital by authority of the Secretary of the Navy; to handle all Navy records, reports, and correspondence in connection with the above patients.



The office records consist of the patients' regular naval health record, copies of the medical reports of the patient made before entering St. Elizabeths Hospital, and copies of reports of the naval medical officer and of the institution staff made after admission. Checks for pay or other moneys due patients are forwarded by the Navy disbursing officers through this office. Checks so received are taken by a representative of this office to the patients for indorsement and then either turned over to the finance officer of St. Elizabeths Hospital or forwarded to the wife or mother as the patient may request. Relatives are communicated with in reference to the appointment of guardians when the mental condition of a patient is such that he is incompetent to indorse checks, and from this office relatives are notified of the discharge from the service of enlisted men, and attention invited to the matter of pensions when same are properly allowable.

Navy and marine patients of the active list, after having been under observation for a short period at St. Elizabeths Hospital, are brought before a naval board of medical survey. This board considers reports upon the patients made by the naval medical officers, both before and after admission to the institution, and the admission and conference reports of the institution staff, and in the cases of enlisted men recommends either discharge from the service or return to active duty, and in the cases of officers recommends either a return to active duty or that the officer be brought before the retiring board.

## (2) UNITED STATES VETERANS' BUREAU CONTACT OFFICE

This office had its origin in the early part of September, 1920, when the Bureau of War Risk Insurance, having closed its hospital, for psychopathic cases at Danville, N. Y., transferred about 200 patients to St. Elizabeths Hospital. Due to a shortage in the hospital force, six or seven doctors were assigned from the Public Health Service to assist the hospital staff, and a clerical force was employed to do the record and paper work which the Bureau of War Risk Insurance required and which could not be satisfactorily performed by the depleted hospital force.

As the Bureau of War Risk Insurance required, as incident to the award of disability compensation, so much in the way of medical reports which could not be furnished by the hospital, the doctors assigned from the Public Health Service performed these duties for the bureau. It was a part of the duties of these doctors to locate the patients in the hospital and those admitted from time to time who were ex-service men and entitled to war service disability compensation and to assist those in filing claims therefor who had not already done so.

The contact office at the hospital now consists of a liaison medical officer, a stenographer, and two typists. The purpose of the contact office is to look after the care and treatment and progress of United States Veterans' Bureau patients, interview new patients upon their admission to determine their status, and make transfers of patients committed from other departments who are entitled to hospitalization under the World War veterans' act of 1924. The liaison officer attends medical conference involving Veterans' Bureau

patients and passes upon the fitness of beneficiaries for discharge, transfer, visit, or ground parole.

The practice has apparently prevailed for some time of referring to this office those communications which are received by the hospital and have to do with Veterans' Bureau patients, and of having the replies thereto prepared for the signature of the superintendent or first assistant physician of the hospital.

The following has developed as to the method employed in the preparation of the letters through which the Director of the Veterans' Bureau made request upon the superintendent to receive patients. This form was used for patients admitted as Veterans' Bureau patients and for those who were taken over by the bureau after commitment.

The form letter used was as follows:

UNITED STATES VETERANS' BUREAU,  
Washington, -----  
SUPERINTENDENT ST. ELIZABETHS HOSPITAL,  
Washington, D. C.

SIR: You are hereby requested to receive into St. Elizabeths Hospital the person of -----, an insane patient of the United States Veterans' Bureau, to be cared for as prescribed by the act of Congress approved March 3, 1875, and March 3, 1919.

Respectfully,

FRANK T. HINES,  
Director United States Veterans' Bureau.

Countersigned.

District medical officer, district No. 4.

Invalid unless countersigned by district medical officer, district No. 4.

Med. 1876, Rev. Mar. 1923.

A stack of these form letters in blank were found in this office upon which a facsimile signature of the director had already been stamped and a pen and ink signature of W. J. Heffner, the medical officer of district No. 4.

It appears that the procedure has been, as a patient at the hospital was located who was presumed to be entitled to hospitalization from the bureau, to have one of these form letters placed in a machine and the name of the patient typed in. It is stated that such inquiry as is made in reference to such patient's military service is usually carried on with the Veterans' Bureau over the telephone.

The countersignature of the medical officer of the Veterans' Bureau was a requisite to the validity of the commitment letter, naturally presupposing that the medical officer acted upon each case as presented.

In addition to the contact officer's force there was assigned to the St. Elizabeths Hospital to assist in the care and treatment of United States Veterans' Bureau patients, especially their vocational rehabilitation, 18 employees whose combined annual salaries amounted to \$36,940.

### XIII. CONCLUSIONS

The following are some of the conclusions which it is believed may be fairly drawn from the facts set forth in this report:

1. The laws under which persons suffering from mental diseases are committed to the hospital are not adequate or sufficiently definite.
2. Numerous patients are in the hospital who, under a strict construction of the laws pertaining thereto, do not seem to belong there.

3. If the hospital's policy of making it a center for the curative treatment and the study of mental diseases of all types is to be continued, that policy should be embodied in legislation.

4. There is not afforded that opportunity to patients to consult with and to obtain the assistance, legal or otherwise, of financially disinterested persons which, though undoubtedly difficult of practical attainment, would seem to be most desirable.

5. There are too many patients in some of the wards, resulting in a crowded and unhealthy condition.

6. Dining rooms, sitting rooms, toilets, baths, and other facilities of some of the wards are quite inadequate and most unsatisfactory.

7. The fire hazard in certain wards is too great, and there does not appear to be sufficient fire-fighting equipment or adequate fire-fighting force.

8. The general medical and surgical facilities are not properly concentrated to meet satisfactorily the legitimate requirements of patients.

9. The necessity for maintaining numerous kitchens unquestionably increases the cost of operation.

10. The method of distribution and control of clothing, bedding, and other articles issued from the storehouse should be improved and an adequate accounting for property should be required of all services.

11. The cost-keeping system should be carried to its logical conclusion and proper accounts of expenditures should be established and maintained and per diem charges should be based upon the figures developed therefrom.

12. The individual records of patients' money should be sufficiently complete to show thereon sources of receipt and purposes for which used, in addition to showing the amounts and dates of receipts and disbursements and balances.

13. A complete method of recording the valuables of patients by each individual and also as a running-control record should be installed and more adequate facilities for safeguarding such valuables should be provided.

14. There is lacking a proper procedure for ascertaining the property and amounts due and becoming due patients, as represented by deposit receipts, bank books, military discharge statements, inheritances, etc., or of reducing same to possession for the benefit of either the patient or the hospital. There appears, in fact, no clear statutory authority for the adoption of such a procedure as would appear advantageous.

15. Some enforceable plan should be authorized for the disposition of the money and property held for patients who die or otherwise become separated from the hospital, in cases where there now exists no clear and enforceable procedure authorized by law.

16. A plan which can be readily administered, as well as adequately controlled by the Congress, for the use of pensioners' money as it becomes available to the hospital appears to be a subject worthy of the early consideration of the Congress.

It may be stated that in so far as the formulation of better systems of administrative accounting for receipts and expenditures and accounting for patients' money and property, is concerned, the General Accounting Office is now assisting the hospital in solving its problems.

## EXHIBIT A

*Statement of property, St. Elizabeths Hospital, June 30, 1925, including schedule of buildings and tracts of land with valuations cost and uses*

Equipment.....	\$535,900.53
Furniture and fixtures in wards.....	336,981.20
Buildings and improvements.....	4,095,299.30
Sites and grounds.....	446,602.50
<b>Total.....</b>	<b>5,414,783.53</b>

Sites and grounds	Acres	Value
St. Elizabeth tract.....	189.09	\$198,450.00
Stable tract (Shepherd farm).....	174.59	183,361.50
Congress Heights tract (Stevens farm).....	59.69	44,722.50
Godding Croft (303.31).....	380.00	20,068.50
<b>Total.....</b>	<b>803.37</b>	<b>446,602.50</b>

*Amount and location of land under cultivation*

St. Elizabeths tract:	Acres
Lawns.....	15
Garden.....	25
Vineyard.....	14
Richardson group.....	6.25
Greenhouse.....	2
<b>Total.....</b>	<b>62.25</b>
Shepherd farm.....	150
Stevens farm.....	59.69
Godding Croft farm.....	175
<b>Total.....</b>	<b>446.94</b>

*Buildings and value of same*

Building	Purpose	Value
1. Administration building.....	Administration purposes.....	\$177,200.86
2. Allison A.....	Use of patients.....	15,997.80
3. Allison B.....	do.....	14,237.16
4. Allison C.....	do.....	14,232.58
5. Allison D.....	do.....	37,677.15
6. Atkins Hall.....	do.....	31,515.12
7. Barn, new.....	Dairy purposes.....	15,876.00
8. Barn, old cow.....	do.....	5,000.00
9. Barn, Godding Croft.....	Farm purposes.....	15,750.00
10. Boiler house.....	Power purposes.....	20,441.19
11. B building.....	Use of patients.....	171,000.00
12. C building.....	do.....	171,000.00
13. E building.....	Female nurses' home.....	64,957.00
14. I building.....	Use of patients.....	59,473.00
15. J building.....	do.....	60,356.00
16. K building.....	do.....	59,085.00
17. L building.....	do.....	58,241.00
18. M building.....	do.....	48,879.00
19. N building.....	do.....	49,662.00
20. P building.....	do.....	132,246.42
21. Q building.....	do.....	130,685.00
22. R building.....	do.....	114,660.24
23. Carpenter shop.....	Shop purposes.....	7,654.50
24. Center building, Dawes.....	Use of patients.....	56,765.12
25. Center building, Garfield.....	do.....	43,107.96
26. Center building, original.....	Use of patients and employees and administration purposes.....	135,288.00
27. Center building, east wing.....	Use of patients.....	123,510.97
28. Center building, west wing.....	do.....	187,219.20
29. Center lodge.....	Shop purposes.....	30,483.94
30. Cottage, Burroughs.....	Physicians' quarters.....	8,306.55



*Buildings and value of same—Continued*

Building	Purpose	Value
31. Cottage, cemetery.....	Use of cemetery sexton.....	\$1,397.65
32. Cottage, Stevens.....	Use of patients and employees.....	1,842.75
33. Dining hall.....	Use of patients.....	36,791.85
34. Dix building, first.....	do.....	9,196.95
35. Dix building, second.....	do.....	8,710.80
36. Dix building, third.....	do.....	18,958.80
37. East lodge.....	Male nurses' home.....	28,628.25
38. Engine house.....	Fire department purposes.....	6,051.15
39. Garage.....	Garage purposes.....	14,896.21
40. Hitchcock Hall.....	Entertainment of patients.....	100,800.00
41. Home building.....	Use of patients.....	71,777.26
42. Hothouses.....	Flowers and plants.....	4,725.00
43. House, Barrett.....	General store.....	1,500.00
44. House, Gate.....	Use of gatemen.....	2,625.00
45. House, Green.....	Use of employees.....	2,310.00
46. House, Godding Croft.....	Use of employees and patients.....	4,725.00
47. House, Maloney.....	Use of employees.....	2,100.00
48. House, Weisbrod.....	do.....	2,310.00
49. House, White.....	do.....	2,311.00
50. House, Williamson.....	do.....	2,310.00
51. Howard Hall.....	Use of patients.....	116,448.99
52. Kitchen, general.....	Bakery, dining room, and cooking.....	61,884.90
53. Kitchen, detached.....	Dining room and cooking.....	14,703.15
54. Kitchen, Toner.....	do.....	21,000.00
55. Laundry building.....	Laundry purposes.....	49,298.93
56. Oaks building No. 1.....	Use of patients.....	27,665.40
57. Oaks building No. 2.....	do.....	50,041.95
58. Pathological laboratory.....	Laboratory purposes.....	9,509.19
59. Power house and stack.....	Power purposes.....	127,358.55
60. Pump house and reservoir.....	Water pumping.....	21,425.71
61. Pump house, new.....	Fire purposes.....	800.00
62. Relief building.....	Use of patients.....	104,863.50
63. Retreat building.....	do.....	56,824.32
64. Stable.....	Horses and vehicles.....	27,425.50
65. Storehouse.....	Supplies, sewing room, and Pasteurizing room.....	29,400.00
66. Shop and storehouse.....	Shop and stores.....	24,754.71
67. Semipermanent building No. 1.....	Use of patients.....	24,997.68
68. Semipermanent building No. 2.....	do.....	24,997.68
69. Semipermanent building No. 3.....	do.....	24,997.68
70. Semipermanent building No. 4.....	do.....	24,997.68
71. Semipermanent building No. 5.....	do.....	24,997.68
72. Semipermanent building No. 6.....	do.....	24,997.68
73. Semipermanent building No. 7.....	do.....	24,997.69
74. Semipermanent building, kitchen.....	Dining room and cooking.....	24,997.69
75. Toner building.....	Use of patients.....	57,796.20
76. Tuberculosis cottage No. 1.....	do.....	3,400.00
77. Tuberculosis cottage No. 2.....	do.....	3,400.00
78. Tuberculosis cottage No. 3.....	do.....	3,400.00
79. Tuberculosis cottage No. 4.....	do.....	3,400.00
80. Tuberculosis cottage No. 5.....	do.....	3,400.00
81. West lodge.....	do.....	61,678.26
82. Public comfort station No. 1.....	Use of patients and employees.....	1,497.79
83. Public comfort station No. 2.....	do.....	1,497.79
84. Public comfort station No. 3.....	do.....	1,497.80
85. Blackburn laboratory.....	Laboratory purposes.....	99,996.17
86. Isolation building.....	Use of patients.....	28,444.06
87. Bungalow No. 1.....	Physicians' quarters.....	6,619.59
88. Bungalow No. 2.....	do.....	6,619.60
89. Bungalow No. 3.....	do.....	6,619.60
90. Bungalow No. 4.....	do.....	6,619.60
91. Bungalow No. 5.....	do.....	6,619.60
92. Bungalow No. 6.....	do.....	6,619.60
93. Bungalow No. 7.....	do.....	6,190.98
94. Cafeteria.....	Pens.....	6,000.00
95. Piggery.....	Fuel testing.....	180.00
96. Fuel house.....	Power purposes.....	300.00
97. Transformer house.....	Weighing.....	6,998.80
98. Scales.....	.....	32,000.00
99. Wall around Howard Hall.....	.....	32,680.00
100. Wall around hospital.....	.....	14,175.00
101. Coal bins.....	.....	4,100.00
102. Elevators.....	.....	4,792.20
103. Water tower.....	.....	18,900.00
104. Water system, underground.....	.....	53,550.00
105. Tunnels.....	.....	21,168.00
106. Railway.....	.....	13,230.00
107. Subway.....	.....	18,900.00
108. Sewer system.....	.....	10,537.96
109. Heat transmission lines, underground.....	.....	17,459.63
110. Electric transmission lines, underground.....	.....	132.00
111. Tank at Godding Croft.....	.....	945.00
112. Steel fencing.....	.....	

*Buildings and value of same—Continued*

Building	Purpose	Value
113. Water system (high-pressure).....	.....	\$11,500.00
114. Clock tower.....	.....	875.00
115. Sun parlors.....	.....	6,448.94
116. Propagating building.....	.....	2,000.00
117. Additions to power plant.....	.....	158,198.99
118. Hydrotherapeutic baths.....	.....	10,328.85
Total.....	.....	4,095,299.30
Value of land.....	.....	446,602.50
Value of buildings.....	.....	4,095,299.30
Value of buildings and land.....	.....	4,541,901.80

## EXHIBIT B

STATEMENTS OF RECEIPTS AND EXPENDITURES OF FUNDS PROVIDED  
FOR THE OPERATION, MAINTENANCE, AND IMPROVEMENT OF ST.  
ELIZABETHS HOSPITAL, 1916 TO 1926

The statements of expenditures are compilations of main direct items of expenditure, but are not intended to be complete cost statements, as it was not possible to allocate readily from available records expenses incurred for repairs and maintenance and for the furnishing of power and similar general items of expenses which should be distributed to the activities benefited thereby. The hospital does keep costs of certain operations, such as the cost of the cafeteria, of the laundry, and certain other general activities, but inasmuch as there is no complete allocation of expenses these partial statements have not been incorporated in this exhibit.

TABLE NO. 1.—Statement of appropriations, reimbursements, expenditures, and balances St. Elizabeths Hospital, by fiscal years, July 1, 1916, to June 30, 1926, and totals to date

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
1. Support, St. Elizabeths Hospital by fiscal years (39 Stat. 309; 40 Stat. 153; 40 Stat. 679; 41 Stat. 205; 41 Stat. 919; 41 Stat. 1408; 42 Stat. 592; 42 Stat. 1215; 43 Stat. 429; 43 Stat. 1182)-----	\$285,250.00	\$300,000.00	\$426,750.00	\$1,000,000.00	\$1,000,000.00	\$1,000,000.00	\$1,000,000.00	\$1,000,000.00	\$900,000.00	\$910,000.00	\$7,822,000.00
2. Certified claims:											
41 Stat. 523; 43 Stat. 56-----			1,359.48	43.20							
41 Stat. 1039; 43 Stat. 1348-----			4,297.46		11.25	115.80					
Public, 36, 69th Cong.-----							1,737.60				7,564.79
3. Collections to augment and reimburse "Support, St. Elizabeths Hospital":											
(a) Board of private patients, includes retired officers (whose board is fixed at \$1 per day), enlisted men of the military establishments, and the salaries of special attendants (R. S. 4853-4854)-----	13,423.03	16,657.75	18,614.20	19,975.28	18,182.42	26,600.82	24,532.97	25,062.54	27,599.47	31,447.46	222,095.94
(b) Board of pensioners (33 Stat. 731; 35 Stat. 592)-----	32,218.85	27,847.94	65,534.85	8,937.80	2,272.82	1,434.92		7,575.18	190.00		146,012.36
(c) Sale of surplus products, waste material and proceeds from sale of articles by "Occupational therapeutic" activities (22 Stat. 350; 41 Stat. 513) (for detail see Table 2)-----	7,585.32	6,603.00	5,874.22	7,657.48	10,286.20	8,607.33	5,932.50	5,375.62	9,359.77	6,683.28	73,964.72
(d) Sales, cafeteria (fiscal year 1925 not specifically authorized) (43 Stat. 1182)-----									40,705.85	40,864.54	81,570.39
(e) Veterans Bureau, personnel and supplies (42 Stat. 1243) (general accounting office transfer settlement No. 771-I) (see 9)-----								44,791.00			44,791.00





8. Buildings, St. Elizabeths Hospital, without year, from funds accrued under acts of Feb. 20, 1905, and Feb. 2, 1909 (42 Stat. 593; 43 Stat. 429)							128,500.00		212,396.72		340,896.72
9. Medical and hospital treatment, Veterans' Bureau, by allotment of funds (43 Stat. 532; 43 Stat. 211), sec 3 (c)									51,250.00	41,000.00	92,250.00
Total credits available to St. Elizabeths Hospital	897,187.14	1,153,277.79	1,302,538.34	2,223,976.17	2,392,532.23	2,406,757.03	2,530,352.45	2,539,635.90	2,967,735.85	2,863,304.55	21,277,297.45
<b>EXPENDITURES BY ST. ELIZABETHS HOSPITAL</b>											
1. Support, St. Elizabeths Hospital, by fiscal years	769,197.54	863,975.74	1,033,377.24	1,874,521.88	1,985,615.36	1,846,026.68	1,944,275.70	2,067,409.80	2,460,498.11	2,637,554.48	17,482,452.53
2. Support, St. Elizabeths Hospital, certified claims					11.25	115.80					127.05
3. Support, St. Elizabeths Hospital, deficiency appropriations			100,000.00								100,000.00
4. Increase of compensation to supplement "Support"		22,910.03	61,099.04	223,609.94	251,467.10	261,601.53	266,015.13	271,271.09			1,357,973.86
A. Total support including increase of compensation	769,197.54	886,885.77	1,194,476.28	2,098,131.82	2,237,093.71	2,107,744.01	2,210,290.83	2,338,680.89	2,460,498.11	2,637,554.48	18,940,553.44
5. Buildings and grounds, St. Elizabeths Hospital, by fiscal years	92,615.54	63,519.08	96,866.94	64,747.29	79,955.80	104,443.60	99,990.97	146,230.80	107,882.11	112,905.64	969,157.77
4. Increase of compensation to supplement "Buildings and grounds"		920.30	3,992.64	7,038.65	6,233.66	7,404.64	8,152.92	8,802.93			42,545.74
A. Total buildings and grounds, including increase of compensation	92,615.54	64,439.38	100,859.58	71,785.94	86,189.46	111,848.24	108,143.89	155,033.73	107,882.11	112,905.64	1,011,703.51
6. Buildings and grounds, St. Elizabeths Hospital, without year	6,962.20	10,816.91	190,441.69	9,130.32	21,424.35	856.91	4,407.73	263.42	6,448.94	9,760.20	260,512.67
7. Buildings, St. Elizabeths Hospital, from funds accrued under acts of Feb. 20, 1905, and Feb. 2, 1909							43,379.74	85,060.49	107,296.04	102,730.30	338,466.57
4. Increase of compensation to supplement "Buildings and grounds"		56.66	63.88	820.95	1,730.15	202.86	68.25	509.68			3,452.43
A. Total buildings and grounds (no year) including increase of compensation	6,962.20	10,873.57	190,505.57	9,951.27	23,154.50	1,059.77	47,855.72	85,833.59	113,744.98	112,490.50	602,431.67
9. Medical and hospital treatment, Veterans' Bureau									47,126.97	40,994.48	88,121.45
Total expenditures by St. Elizabeths Hospital	868,775.28	962,198.72	1,485,841.43	2,179,869.03	2,346,437.67	2,220,652.02	2,366,290.44	2,579,548.21	2,729,252.17	2,903,945.10	20,642,810.07

<sup>1</sup> Indicates deduction on account of transfer to other years.

TABLE NO. 1.—Statement of appropriations, reimbursements, expenditures, and balances St. Elizabeths Hospital, by fiscal years, July 1, 1916, to June 30, 1926, and totals to date—Continued

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
UNEXPENDED BALANCES											
1. Support, St. Elizabeths Hospital, by fiscal years.....	\$10, 103. 72	\$1, 870. 94	\$2, 005. 54	\$52, 984. 75	\$17, 123. 71	\$176, 523. 52	\$83, 340. 45	\$45, 142. 40	\$135, 591. 02	\$71, 750. 07	\$596, 436. 12
Do.....					351. 00	190. 00					541. 00
6. Buildings and grounds, St. Elizabeths Hospital, by fiscal years.....	515. 34	25. 04	5, 133. 06	252. 71	44. 20	10, 248. 40	9. 03	269. 20	117. 89	94. 36	16, 709. 23
7. Buildings, St. Elizabeths Hospital, without year.....	17, 792. 80	189, 183. 09	190, 441. 69	19, 130. 32	28, 575. 65	1856. 91	14, 407. 73	1263. 42	16, 448. 94	19, 760. 20	14, 242. 33
8. Buildings, St. Elizabeths Hospital, without year, from funds accrued under acts of Feb. 20, 1905, and Feb. 2, 1909.....							85, 120. 26	185, 060. 49	105, 100. 68	1102, 730. 30	2, 430. 15
9. Medical and hospital treatment, Veterans' Bureau.....									4, 123. 03	5. 52	4, 128. 55
Totals.....	897, 187. 14	1, 153, 277. 79	1, 302, 538. 34	2, 223, 976. 17	2, 392, 532. 23	2, 406, 757. 03	2, 530, 352. 45	2, 539, 635. 90	2, 967, 735. 85	2, 863, 304. 55	21, 277, 297. 45

<sup>1</sup> Indicates deduction on account of transfer to other years.

TABLE NO. 2.—Summary of detailed analysis of miscellaneous collections and refunds, "Support, St. Elizabeths Hospital"

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
Medical division.....	\$30. 28	\$25. 40	\$23. 11	\$37. 29	\$58. 02	\$53. 00	\$119. 27	\$166. 55	\$62. 77	\$64. 13	\$639. 82
Industrial and occupational therapy.....				24. 75	632. 75	1, 384. 59	335. 45	1, 328. 35	2, 359. 40	1, 471. 80	7, 537. 09
Operation kitchens and bakery.....	2, 104. 40	1, 576. 75	1, 628. 79	1, 946. 70	1, 541. 85	1, 231. 40	899. 79	1, 219. 36	1, 195. 77	1, 627. 75	14, 972. 56
Operation farm and gardens.....	3, 091. 62	4, 014. 95	2, 757. 64	2, 533. 54	3, 889. 14	2, 379. 56	2, 258. 61	1, 790. 99	3, 983. 04	2, 926. 39	29, 625. 48
Operation laundry.....	654. 10	686. 12	700. 84	715. 87	1, 494. 99	1, 553. 50	1, 298. 04				7, 103. 46
Administrative office.....	295. 50	117. 84	175. 98	659. 45	636. 05	103. 36	830. 67	480. 95	315. 59	257. 85	3, 873. 24
Mechanical division.....	1, 407. 76	173. 70	587. 86	1, 611. 61	2, 031. 81	1, 816. 28	172. 19	358. 20	1, 110. 28	320. 70	9, 590. 39
Lawns and grounds.....				23. 61							23. 61
Operation sewing and repair rooms.....		. 12			. 09		2. 59	3. 25	279. 37	4. 98	290. 40
Refunds overpayments.....	1. 66	8. 12		104. 66	1. 50	85. 64	15. 89	27. 97	53. 55	9. 68	308. 67
Total miscellaneous reimbursements to "Support, St. Elizabeths Hospital".....	7, 585. 32	6, 603. 00	5, 874. 22	7, 657. 48	10, 286. 20	8, 607. 33	5, 932. 50	5, 375. 62	9, 359. 77	6, 683. 28	73, 964. 72

DETAILS OF ABOVE SUMMARY

Medical division:											
Broken and lost thermometers	\$30.28	\$25.40	\$23.11	\$37.29	\$51.90	\$44.50	\$76.70	\$63.70	\$33.44	\$33.88	\$420.20
Broken and lost syringes						5.50		9.10	2.00	4.00	20.60
Sale of X-ray plates and films					6.12	3.00	42.57	93.75	26.25	26.25	197.94
Plaster Paris									1.00		1.00
Vaccine point									.08		.08
Total	30.28	25.40	23.11	37.29	58.02	53.00	119.27	166.55	62.77	64.13	639.82
Operation of kitchens and bakery:											
Sale of grease bones	942.73	741.41	912.07	1,192.92	1,282.95	729.67	671.14	820.99	1,010.76	1,055.88	9,360.52
Sale of empty barrels	1,122.56	816.09	674.81	587.50	258.90	269.85	228.65	297.99	155.16	80.80	4,492.31
Sale of empty sacks				166.28		231.88		76.67	29.85	340.87	845.45
Sale of lead foil	39.11		41.91								81.02
Sale of empty cans										25.20	25.20
Sale of scrap kitchenware								23.81			23.81
Sale of dough mixer										125.00	125.00
Sale of anthracite coal		19.25									19.25
Total	2,104.40	1,576.75	1,628.79	1,946.70	1,541.85	1,231.40	899.79	1,219.36	1,195.77	1,627.75	14,972.56
Operation of farm and gardens:											
Sale of cows and calves	2,848.18	3,987.10	2,238.73	2,125.83	3,684.78	2,325.62	2,015.02	1,417.43	3,925.48	2,855.31	27,423.48
Sale of hog intestines	12.10	27.85	39.00	82.94	100.25		65.70	81.90	57.56	71.08	538.38
Sale of pigs						53.94					53.94
Sale of empty sacks and burlap	228.53		479.91	324.77	104.11		177.89	180.66			1,495.87
Sale of old carriages, harness, etc.	2.81							111.00			113.81
Total	3,091.62	4,014.95	2,757.64	2,533.54	3,889.14	2,379.56	2,258.61	1,790.99	3,983.04	2,926.39	29,625.48
Administrative:											
Hospital rule books lost	.57				.15	.45	.91	1.68	2.68	1.50	7.94
Sanitary packets (vending machine)							2.10	7.70	5.70	3.60	19.10
Sale of rags	294.93	117.84	175.98	659.45	635.90	70.81	291.26	471.67	287.96	252.75	3,258.45
Sale of waste material						32.10	536.40		19.25		587.75
Total	295.50	117.84	175.98	659.45	636.05	103.36	830.67	480.95	315.59	257.85	3,873.24
Mechanical division:											
Sale of ice to resident employees and to canteen	73.20	64.99	201.37	70.50	94.05	116.55	105.73	107.88	559.08	296.14	1,689.49
Sale of water to Bolling Field			282.63	533.73	1,937.76	1,590.42					4,344.54
Ward keys lost			.10				.55	1.50	1.00	1.25	4.40
Sale of scrap iron				1,007.38				245.44	535.20	20.56	1,808.58
Sale of scrap platinum			55.65								55.65
Sale of empty barrels and paint cans	7.65	38.71									46.36
Sale of electric bulbs (old style)	155.88										155.88
Sale of scrap copper						83.91					83.91
Sale of scrap metal	1,171.03										1,171.03

TABLE No. 2.—*Summary of detailed analysis of miscellaneous collections and refunds, "Support, St. Elizabeths Hospital"*—Continued

## DETAILS OF ABOVE SUMMARY—Continued

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
Mechanical division—Continued.											
Sale of scrap rubber.....						\$0.78					\$0.78
Hauling railroad cars for contractor.....		\$70.00	\$48.11						\$10.00		128.11
Sale of an armature.....						15.00					15.00
Replacement parts to air compressor.....									5.00		5.00
Replacement parts to sewer cleaner.....							\$22.60				22.60
Repairs to gate (broken by auto).....							4.00				4.00
Repairs to manhole cover and light pole.....							21.50				21.50
Refund cost of coffins.....						9.62	17.81	\$3.38		\$2.75	33.56
Total.....	\$1,407.76	178.70	587.86	\$1,611.61	\$2,081.81	1,816.28	172.19	358.20	1,110.28	320.70	9,590.89

TABLE No. 3.—*General summary statement of expenditures for support of St. Elizabeths Hospital*

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
Treatment of patients:											
Medical division.....	\$159,107.75	\$150,233.93	\$153,678.26	\$560,012.57	\$740,464.72	\$786,525.05	\$823,124.61	\$871,616.66	\$984,040.21	\$1,014,819.47	\$6,243,623.23
Industrial and occupational therapy.....	3,851.24	2,388.91	4,114.92	27,263.03	20,593.64	23,141.14	26,786.69	59,133.89	25,139.96	27,633.69	220,047.11
Personal services, patients.....	440.00	1,478.48	2,591.38	1,788.58	1,221.19	991.00	941.17	933.50	877.17	840.00	12,102.47
Amusements and entertainments.....	3,125.95	1,705.95	1,556.70	1,798.85	1,005.69	1,009.00	952.95	909.40	1,033.04	1,205.73	14,303.26
Church services.....	599.00	656.12	580.00	624.77	600.00	598.00	600.00	605.00	494.50	594.50	5,951.89
Books and periodicals.....	650.00	270.84	399.72	880.49	759.13	847.27	981.84	1,372.75	1,266.20	1,309.29	8,737.63
Tobacco and pipes.....	5,080.44	3,096.82	6,347.60	16,247.45	8,426.61	13,088.38	6,534.09	7,701.59	7,646.96	6,510.34	80,630.28
Feeding of patients:											
Operation of kitchens, bakery, etc.....	272,312.93	340,214.15	449,612.39	619,141.37	546,869.80	513,261.44	513,324.22	557,319.67	529,665.31	596,893.43	4,938,614.71
Operation of farms and gardens.....	61,039.30	85,901.64	101,638.09	144,018.27	112,272.61	105,008.14	105,168.70	120,865.04	120,744.36	132,421.27	1,089,077.42
Care of patients:											
Operation of sewing and repair rooms.....	23,104.35	24,672.97	68,363.87	66,341.02	79,472.70	61,556.02	45,200.16	64,323.08	75,125.31	79,306.34	587,465.82
Wearing apparel purchased.....	10,969.25	18,784.45	25,955.30	47,773.19	66,896.11	48,181.32	52,254.82	45,874.88	44,827.94	53,249.08	414,766.34
Toilet articles.....	845.06	1,465.60	2,322.99	4,069.90	3,193.31	3,638.65	1,776.52	2,373.36	2,199.81	1,157.04	23,042.24
Bedding, blankets, etc.....	8,419.28	10,076.50	24,636.74	23,804.16	33,934.17	14,535.88	11,461.29	30,080.60	15,182.19	30,724.30	202,905.11
Household operations.....	7,945.07	8,913.46	10,392.30	16,406.28	19,665.11	12,694.47	15,432.16	21,394.04	21,518.06	20,682.69	155,043.64
Operation of laundry.....	14,066.47	16,163.62	18,946.83	33,340.68	38,128.52	31,425.58	33,330.63	33,376.72	43,801.30	39,667.02	302,247.37
General administration.....	34,941.81	37,451.38	48,736.04	70,889.80	83,130.51	91,629.34	96,160.02	105,794.92	111,098.23	113,992.50	793,824.55
Operation of mechanical departments.....	122,277.39	159,954.43	243,636.78	323,572.96	365,761.32	293,805.62	366,819.35	307,510.96	300,403.72	333,031.74	2,816,774.27
Operation of garage.....				2,646.87	38,066.84	41,355.29	37,594.04	36,705.36	46,109.39	45,815.52	248,293.81



Operation of greenhouse and care of lawns and grounds.....	8,004.42	8,236.03	8,773.97	16,514.77	12,524.24	12,964.43	14,560.18	16,146.49	19,309.10	24,677.68	141,711.31
Transportation of patients to their homes.....	2.00	108.67	36.72	8.00	-----	-----	-----	-----	-----	324.33	479.72
Return of eloped patients.....	220.00	426.05	550.00	485.00	375.00	235.00	150.00	200.00	205.00	185.00	3,031.05
Maintenance and treatment at other hospitals.....	-----	-----	7,992.02	591.34	-----	-----	-----	-----	-----	-----	8,583.36
Miscellaneous adjustments.....	25.78	307.94	6.31	40.10	20.00	-----	-----	-----	-----	-----	360.13
Net operating expenditures.....	736,977.49	872,507.94	1,180,868.93	1,978,309.45	2,173,341.22	2,056,491.02	2,153,153.44	2,284,238.41	2,350,687.76	2,525,040.96	18,311,616.62
Invested in equipment.....	23,918.64	6,314.50	7,663.13	112,081.33	52,340.63	42,364.84	50,985.33	49,011.86	58,735.14	64,843.17	468,258.57
Refunds for board.....	716.09	1,460.33	70.00	83.56	1,125.66	280.82	219.56	55.00	1,009.59	122.53	5,143.14
Expenditures reimbursed.....	7,585.32	6,603.00	5,874.22	7,657.48	10,286.20	8,607.33	5,932.50	5,375.62	9,359.77	6,683.28	73,964.72
Cafeteria sales.....	-----	-----	-----	-----	-----	-----	-----	-----	40,705.85	40,864.54	81,570.39
Grand total.....	769,197.54	886,885.77	1,194,476.22	2,098,131.82	2,237,093.71	2,107,744.01	2,210,290.83	2,338,680.89	2,460,498.11	2,637,554.48	18,940,553.44

## EXPENDITURES FOR MEDICAL DIVISION

Personal services—medical technical.....	\$31,801.51	\$32,617.49	\$27,803.86	\$69,436.49	\$81,018.12	\$94,655.75	\$112,736.38	\$126,312.15	\$167,675.66	\$170,219.25	\$914,276.66
Increase of compensation.....	-----	1,259.86	2,089.83	5,354.40	4,438.94	5,245.59	6,464.14	6,082.64	-----	-----	30,935.40
Personal services, social service workers.....	-----	-----	-----	240.00	1,260.00	1,721.00	2,655.82	3,202.50	4,146.27	4,458.60	17,684.19
Increase of compensation.....	-----	-----	-----	60.00	240.00	277.33	388.67	441.33	-----	-----	1,407.33
Personal services, ward nurses and attendants.....	122,329.30	100,810.03	94,238.83	345,689.71	491,067.93	522,648.80	539,689.43	568,185.63	803,891.68	832,099.90	4,420,651.24
Increase of compensation.....	-----	10,081.08	22,644.07	123,157.59	148,091.40	150,466.05	150,906.41	156,066.46	-----	-----	761,413.06
Special services, oculists.....	408.00	336.00	416.00	416.00	416.00	408.00	392.00	400.00	392.00	408.00	3,992.00
Medical supplies.....	3,134.56	3,176.91	3,937.77	6,819.20	6,186.41	4,848.50	4,132.59	3,815.34	6,379.05	6,316.26	48,746.59
Surgical supplies.....	1,135.84	1,651.31	1,304.16	3,896.61	2,433.61	2,620.55	2,420.71	2,585.37	2,818.55	3,338.70	24,205.41
Dental supplies.....	17.54	165.33	136.04	165.21	286.33	675.33	659.83	1,341.69	1,314.45	1,553.31	6,315.06
Laboratory supplies.....	232.34	116.38	995.26	4,805.65	4,800.58	2,900.85	2,346.56	2,439.81	4,515.24	4,556.92	27,709.59
Gas used by laboratory.....	-----	-----	-----	-----	-----	-----	77.35	100.24	150.85	221.90	550.34
Oculist supplies.....	75.04	37.74	122.10	-----	147.35	.50	121.50	84.51	87.50	291.89	968.13
Repairs to equipment.....	3.90	7.20	13.45	9.00	136.07	109.80	252.49	725.54	232.80	110.82	1,601.07
Gross total.....	159,138.03	150,259.33	153,701.37	560,049.86	740,522.74	786,578.05	823,243.88	871,783.21	991,604.05	1,023,575.55	6,260,456.07
Appropriations reimbursements.....	30.28	25.40	23.11	37.29	58.02	53.00	119.27	166.55	62.77	64.13	639.82
Less Veterans' Bureau expenditures.....	-----	-----	-----	-----	-----	-----	-----	-----	7,501.07	8,691.95	16,193.02
Net total.....	159,107.75	150,233.93	153,678.26	560,012.57	740,464.72	786,525.05	823,124.61	871,616.66	984,040.21	1,014,819.47	6,243,623.23
Equipment purchased.....	380.68	85.96	1,121.75	10,369.94	1,664.39	6,600.57	2,101.00	10,788.41	6,459.04	6,298.89	45,870.63

TABLE No. 3.—General summary statement of expenditures for support of St. Elizabeths Hospital—Continued  
EXPENDITURES FOR INDUSTRIAL AND OCCUPATIONAL THERAPY ACTIVITIES (BROOM SHOP, SHOE SHOP, RUG WEAVING)

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
Personal services—Instructors .....	\$1,020.00	\$1,020.00	\$1,190.00	\$11,624.00	\$14,180.24	\$16,852.63	\$16,722.41	\$43,602.00	\$45,596.84	\$39,831.84	\$191,639.96
Increase of compensation .....		102.00	230.00	2,653.34	2,938.31	3,315.33	3,199.65	3,055.66			15,494.29
Materials and supplies .....	2,831.24	1,266.91	2,679.92	13,000.20	4,080.08	7,250.13	7,200.08	13,792.58	10,759.30	12,284.88	72,145.32
Small tools .....				10.24	27.76	51.89				42.85	132.74
Repairs to equipment .....			15.00			55.75		12.00	17.40	4.47	104.62
Gross total .....	3,851.24	2,388.91	4,114.92	27,287.78	21,226.39	24,525.73	27,122.14	60,462.24	56,373.54	52,164.04	279,516.93
Appropriations reimbursements .....				24.75	632.75	1,384.59	335.45	1,328.35	2,359.40	1,471.80	7,537.09
Less Veterans' Bureau expenditures .....									28,874.18	23,058.55	51,932.73
Net total .....	3,851.24	2,388.91	4,114.92	27,263.03	20,593.64	23,141.14	26,786.69	59,133.89	25,139.96	27,633.69	220,047.11
Equipment purchased .....				379.93	151.50	123.77	1,676.68	7.25		1,214.48	3,553.61
Main items produced—Mattress shop:											
Mattresses made and made over .....											
number .....	1,053	1,372	1,869	1,604	1,426	1,530	(1)	1,818	1,681	1,745	
Pillows made and made over .....	957	1,161	1,751	1,118	1,556	1,449	(1)	1,582	1,365	1,490	
Mats drawn and braided .....	177	124	103	118	128	147	(1)	112		143	
Hair, old, renovated .....	24,175	29,651	16,700	34,100	32,250	26,900	(1)	31,600	33,800	32,550	

## EXPENDITURES FOR AMUSEMENTS AND ENTERTAINMENTS

Musicians .....	\$1,891.00	\$1,255.00	\$1,129.00	\$1,035.00	\$413.00	\$482.00	\$447.00	\$450.00	\$410.00	\$390.00	\$7,902.00
Postage stamps .....	111.00	200.00	310.00	210.00	300.00	215.00	250.00	200.00	200.00	210.00	2,206.00
Games, cards, etc. ....	64.85	115.45	113.50	221.60	152.39	144.00	89.95	114.40	175.88	459.63	1,651.65
Special entertainments .....	795.00	130.50		131.25	132.00	132.00	147.50	145.00	142.10	142.10	1,897.45
Repairs to equipment .....	264.10	5.00	4.20	201.00	8.30	36.00	18.50		105.06	4.00	646.16
Total .....	3,125.95	1,705.95	1,556.70	1,798.85	1,005.69	1,009.00	952.95	909.40	1,033.04	1,205.73	14,303.26
Purchase of equipment .....	186.90			978.00	7.25	597.00		29.25	12.06	356.38	2,166.84

## EXPENDITURES FOR OPERATION OF KITCHENS, CAFETERIA, BAKERY, AND DINING ROOMS

Personal services, cooks, helpers, and waitresses .....	\$33,530.08	\$32,902.07	\$36,691.17	\$72,317.26	\$79,128.40	\$83,746.33	\$85,061.47	\$87,751.07	\$136,586.06	\$137,229.34	\$785,543.25
Increase of compensation .....		2,870.41	9,546.41	28,357.22	28,751.58	31,319.06	32,173.91	32,429.71			165,448.30

[illegible]

<sup>1</sup> Not readily available.

TABLE No. 3.—General summary statement of expenditures for support of St. Elizabeths Hospital—Continued

## EXPENDITURES FOR OPERATION OF FARM, GARDENS, STABLES, DAIRY, HENNERY, AND PIGGERY

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
Personal services .....	\$27,767.48	\$30,863.19	\$33,121.04	\$50,044.14	\$40,244.51	\$45,019.65	\$46,154.41	\$48,383.45	\$70,209.85	\$68,742.55	\$460,550.27
Increase of compensation .....		2,444.21	8,099.48	18,256.68	13,803.14	14,229.04	14,503.30	14,235.28			85,571.13
Special services, veterinary .....	625.00	627.00	1,250.00	900.00	900.00	900.00	900.00	900.00	1,500.00	1,500.00	10,002.00
Seeds, plants, etc. ....	1,417.26	1,057.25	1,298.79	2,167.64	1,283.19	1,194.58	1,020.81	1,274.33	1,720.19	1,941.75	14,375.79
Fertilizers .....	148.75	5.00		193.75	365.25	969.50	374.80	402.36	847.85	1,857.93	5,165.19
Forage and feeds .....	33,288.25	53,570.08	59,870.18	68,800.02	55,499.10	38,687.24	37,394.27	49,630.99	50,659.84	58,082.07	505,482.04
Animals, food-producing .....	57.50	324.50	252.50	2,820.33	1,673.70	3,989.75	5,364.90	5,589.20	1,847.58	3,817.00	25,736.96
Small tools .....	114.26	25.09	23.42	190.66	232.98	251.40	81.37	80.98	21.62	78.87	1,100.65
Miscellaneous supplies .....	624.30	973.07	382.52	3,063.65	2,050.93	2,112.56	1,552.11	2,070.19	2,079.07	2,423.71	17,332.11
Repairs to equipment .....	88.12	27.20	97.80	114.94	108.95	33.98	78.71	89.25	124.79	228.00	991.74
Gross total .....	64,130.92	89,916.59	104,395.73	146,551.81	116,161.75	107,387.70	107,424.68	122,656.03	129,010.79	138,671.88	1,126,307.88
Appropriations reimbursements .....	3,091.62	4,014.95	2,757.64	2,533.54	3,889.14	2,379.56	2,255.98	1,790.99	3,983.02	2,926.39	29,622.85
Less Veterans' Bureau charges included .....									4,283.39	3,324.22	7,607.61
Net total .....	61,039.30	85,901.64	101,638.09	144,018.27	112,272.61	105,008.14	105,168.70	120,865.04	120,744.36	132,421.27	1,089,077.42
Equipment purchased .....	986.25	316.72	90.00	1,062.71	1,061.72	2,126.25	630.81	851.21	446.43	6,733.79	14,305.89
Horses purchased .....	1,907.50									1,769.00	3,676.50
Main items produced:											
Farm and garden products—											
Milk .....	147,022	155,033	172,601	167,513	175,954	181,303	161,320	173,240	173,163	206,794	
Potatoes, Irish .....	117,960	572,100	59,080	52,727	179,760	55,800	44,130	20,970	3,450	35,520	
Carrots .....	34,850	10,975	17,650	27,956	6,406	21,850	3,350	25,365	33,512	10,076	
Eggs .....	3,268	4,303	5,454	6,476	8,842	8,243	10,211	13,379	12,474	10,182	
Grapes .....	15,040	14,800	10,720	15,840	12,456	7,068	14,350	7,285	16,080	6,660	
Pork, fresh .....	14,176	19,495	20,726	32,358	71,137	67,500	100,035	129,436	97,824	109,656	
Cabbage and sprouts .....	281	166	296	110	273	1,001	214	459	601	396	
Chicken .....	1,283	1,198	333	540	682	541	1,507	1,592	1,783	3,098	
Forage and feed—											
Corn, shelled .....	219	310	333	165	195	10	10	145	30	429	
Corn, ensilage .....						534	779	694	448	471	
Hay, green (clover, cowpeas, rye, wheat, corn, oats, timothy, alfalfa, orchard grass) .....	388	436	813	928	886	293	320	536	374	332	



## EXPENDITURES FOR OPERATION OF SEWING AND REPAIR ROOMS

Personal services—Seamstresses.....	\$2,871.00	\$2,696.20	\$3,333.75	\$6,465.99	\$8,039.92	\$8,627.17	\$8,497.16	\$8,184.58	\$14,997.84	\$13,895.17	\$77,608.78
Increase of compensation.....		264.12	993.50	2,895.05	3,083.30	3,231.03	3,180.66	3,158.55			16,806.21
Dry goods and materials (includes thread and buttons).....	20,144.78	21,650.56	63,937.51	56,620.81	67,913.15	49,563.39	33,143.73	52,534.12	60,172.11	65,177.82	490,857.98
Sewing room supplies (needles, scissors, and thimbles).....	88.57	47.69	99.11	316.25	436.42	117.99	361.95	446.33	189.28	215.42	2,319.01
Repairs to equipment.....		14.52		42.92		16.44	19.25	2.75	45.45	22.91	164.24
Gross total.....	23,104.35	24,673.09	68,363.87	66,341.02	79,472.79	61,556.02	45,202.75	64,326.33	75,404.68	79,311.32	587,756.22
Appropriations reimbursements.....		.12			.09		2.59	3.25	279.37	4.98	290.40
Net total.....	23,104.35	24,672.97	68,363.87	66,341.02	79,472.70	61,556.02	45,200.16	64,323.08	75,125.31	79,306.34	587,465.82
Equipment purchased.....	90.36		21.27	772.00	854.35		25.92		135.00	296.08	2,194.98
Main items produced: Sewing and mending rooms—											
Pillowcases made.....	5,033	6,351	7,172	7,746	6,793	6,722	(1)	8,313	7,616	8,623	
Double and single sheets made.....	5,859	8,531	12,128	12,808	8,957	7,764	(1)	7,240	13,059	12,720	
Towels made.....	7,636	8,273	11,271	12,780	13,729	12,231	(1)	18,319	10,853	17,013	
Dresses made.....	3,369	2,913	2,681	4,048	4,513	4,969	(1)	6,032	6,980	8,616	
Petticoats made.....	1,097	1,144	999	1,414	1,483	2,029	(1)	1,675	2,423	2,569	
Miscellaneous repairs.....	33,965	31,229	30,892	33,585	38,767	37,504	(1)	33,025	42,628	44,169	

## EXPENDITURES FOR HOUSEHOLD OPERATIONS

Personal services: Housekeepers and chambermaids.....	\$1,969.38	\$2,115.74	\$2,530.83	\$2,979.33	\$3,100.50	\$2,879.50	\$2,956.25	\$2,963.58	\$3,683.00	\$3,320.00	\$28,498.11
Increase of compensation.....		211.58	663.25	1,305.33	1,127.83	1,082.10	1,125.75	1,131.45			6,647.29
Household supplies.....	5,975.69	6,586.14	7,198.22	12,121.62	15,436.78	8,732.87	11,350.16	17,299.01	17,835.06	17,362.69	119,898.24
Total.....	7,945.07	8,913.46	10,392.30	16,406.28	19,665.11	12,694.47	15,432.16	21,394.04	21,518.06	20,682.69	155,043.64
Equipment purchased.....					966.84						966.84

<sup>1</sup> Not readily available.

TABLE NO. 3.—General summary statement of expenditures for support of St. Elizabeths Hospital—Continued

## EXPENDITURES FOR OPERATION OF LAUNDRY

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
Personal services.....	\$10,662.26	\$10,501.85	\$11,705.26	\$18,495.48	\$19,803.74	\$19,624.72	\$19,257.67	\$18,475.58	\$32,229.34	\$33,324.00	\$194,079.90
Increase of compensation.....		784.19	3,218.07	7,471.19	6,938.91	6,941.85	6,999.74	6,795.56			39,149.51
Materials and supplies.....	3,186.22	5,469.17	4,679.84	7,744.58	12,693.92	6,275.75	8,076.61	7,863.01	11,485.13	6,140.32	73,614.55
Fuel—gasoline.....	758.82	93.63									852.45
Repairs, parts, or equipment.....	113.27	.90	44.50	345.30	186.94	136.76	294.65	242.57	86.83	202.70	1,654.42
Gross total.....	14,720.57	16,849.74	19,647.67	34,056.55	39,623.51	32,979.08	34,628.67	33,376.72	43,801.30	39,667.02	309,350.83
Appropriations reimbursements.....	654.10	686.12	700.84	715.87	6.59 1,488.40	1,553.50	1,298.04				7,103.46
Net total.....	14,066.47	16,163.62	18,946.83	33,340.68	38,128.52	31,425.58	33,330.63	33,376.72	43,801.30	39,667.02	302,247.37
Equipment purchased.....	2,869.96	665.00	36.00	18,997.96	14,166.71	6,736.79	7,237.43		4,534.90	7,760.83	63,005.58
Production data (from annual reports):											
Pieces washed.....	3,633,221	3,534,709	3,871,392	4,467,000	4,983,610	5,121,329	5,162,896	4,945,885	4,382,150	5,334,185	
Pieces dried.....	1,564,931	1,479,491	1,416,716	1,623,000	1,774,373	1,750,308	1,746,903	1,781,431	1,412,314	1,841,286	
Pieces mangled.....	2,068,290	2,055,218	2,424,148	2,334,000	2,689,476	2,906,405	2,922,215	2,792,784	2,613,502	3,089,631	
Pieces ironed.....	455,091	360,061	336,876	352,500	423,861	464,616	493,187	371,670	366,754	403,268	

## EXPENDITURES FOR GENERAL ADMINISTRATION

Personal services:											
Superintendent, clerks, etc.....	\$31,316.96	\$31,637.19	\$38,489.89	\$53,354.54	\$62,794.74	\$65,652.04	\$67,717.57	\$75,883.65	\$96,550.77	\$100,249.08	\$623,646.43
Increase of compensation.....		1,794.95	4,126.07	8,922.93	9,586.00	10,029.01	10,372.31	11,091.99			55,923.26
Watchmen and gatekeepers.....	1,500.00	1,482.50	1,145.00	2,420.00	5,347.50	8,111.17	7,922.70	7,956.25	11,946.83	11,711.00	59,542.95
Increase of compensation.....		148.25	240.00	970.00	1,736.67	2,379.33	2,338.66	2,296.67			10,109.58
Stationery.....	28.06	37.15	38.01	5.77	21.60	28.61	3,531.04	3,501.00	3,559.00	3,535.36	14,285.60
Materials and supplies.....	.50		10.00	142.00	55.26	74.54	95.91		4.50	26.02	408.73
Telegraph.....	112.10	112.79	310.32	196.71	125.04	113.36	139.10	134.62	132.43	153.70	1,530.17
Telephone.....	1,376.54	1,377.95	2,115.65	2,452.83	2,882.70	3,682.10	1,338.17	1,352.68	1,371.97	1,421.90	19,372.49
Travel.....			123.67								123.67
Advertising.....		75.52	1,114.23	557.23				21.84			1,768.82
Miscellaneous special services.....	60.00	50.00	50.00	57.50	60.00	60.00	57.50	55.00	57.50	55.00	562.50
Legal expense.....	36.70	29.70									66.40
Fuel used in quarters and gatehouses.....	800.00	800.00	1,100.00	2,200	900	1,200.00	1,800.00	3,000.00	1,300.00	2,700.00	15,800.00

Repairs to equipment.....	6.45	15.60	28.77	153.19	66.26	59.13	34.88	29.22	204.45	123.76	721.71
Miscellaneous freight expenses and hauling.....		7.62	20.41	116.55	63.32	25.04	1,640.91	216.18	62.82	4.61	2,157.46
Transfers to retirement fund in excess of deductions.....					127.47	318.37	1.94	736.77	2,409.75	76.87	3,671.17
Gross total.....	35,237.31	37,569.22	48,912.02	71,549.25	83,766.56	91,732.70	96,990.69	106,275.87	114,600.02	120,057.30	809,690.94
Appropriations reimbursements.....	295.50	117.84	175.98	659.45	636.05	103.36	830.67	480.95	315.59	257.85	3,873.24
Less Veterans' Bureau expenditures included.....									6,186.20	5,806.95	11,993.15
Net total.....	34,941.81	37,451.38	48,736.04	70,889.80	83,130.51	91,629.34	96,160.02	105,794.92	111,098.23	113,992.50	793,824.55
Purchase of equipment.....	2,984.90	570.25	9.60	2,738.91	2,185.19	938.50	4,161.47	1,036.43	16,819.06	1,072.08	32,516.39

## EXPENDITURES FOR OPERATION OF MECHANICAL DEPARTMENTS

Engineer department (includes railroad operation and maintenance of power, heat, light, and refrigeration plants):											
Personal services.....	\$31,156.54	\$34,821.16	\$37,843.47	\$65,165.29	\$71,298.53	\$74,116.88	\$74,586.18	\$74,336.78	\$92,807.82	\$93,794.49	\$649,927.14
Increase of compensation.....		1,622.22	5,590.42	14,876.42	15,163.81	15,857.96	16,293.62	16,171.30			85,575.75
Special services, consulting engineer.....	263.94	40.00	7.87			135.99	138.40				586.20
Lubricants.....	762.38	645.21	1,852.59	1,770.79	1,995.95	2,184.98	1,460.65	1,053.06	1,141.68	1,105.42	13,972.71
Materials and supplies.....	1,424.56	1,022.14	2,687.06	4,262.06	5,095.68	3,151.66	3,043.97	2,006.77	2,986.63	3,409.57	29,090.10
Ammonia and calcium chloride.....	276.79	278.12	583.30	851.87	635.76	625.84	320.28	498.70	544.38	735.77	5,350.81
Small tools.....	802.64	164.06	534.51	855.59	1,448.75	887.64	1,166.06	438.77	752.61	765.12	7,815.75
Fuel, bituminous coal.....	58,218.38	97,290.46	150,259.67	150,729.10	199,341.58	123,251.47	189,280.38	132,004.62	125,633.73	140,205.72	1,366,215.11
Less used elsewhere.....						7,000.00					7,000.00
Repairs to equipment.....	1,256.48	1,177.84	6,344.85	2,466.93	2,894.38	1,064.60	1,194.46	249.04	585.25	775.81	18,009.64
Rental of equipment (railroad).....			738.05			313.37				832.53	1,883.95
Cost of laying gas mains to employees' cottages.....									465.87		465.87
Total engineer department.....	94,161.71	137,061.21	206,441.79	240,978.05	297,874.44	214,590.39	287,484.00	226,759.04	224,917.97	241,624.43	2,171,893.03
Carpenter and construction departments (includes road building and maintenance):											
Personal services.....	6,057.45	7,277.30	8,407.15	14,364.33	13,500.15	16,820.82	20,268.27	19,655.44	21,998.58	22,615.33	150,964.82
Increase of compensation.....		448.57	1,140.34	3,054.44	2,747.98	3,573.01	4,077.60	3,459.64			19,001.58
Materials and supplies.....	827.83	1,647.85	1,939.42	2,707.65	3,881.29	2,767.74	2,475.26	1,939.55	2,124.37	3,030.15	23,341.11
Lumber.....	94.00		150.00	844.85	124.20	33.68	341.45	1,078.41	22.42	1,389.62	4,078.63
Cement, sand, and gravel.....								195.00			195.00
Small tools.....	92.61	1.00	91.06	159.22	249.27	307.03	176.12	258.67	132.33	273.09	1,740.40
Repairs to equipment.....				370.15	45.10	9.00		188.34	59.58	48.66	720.83
Total, carpenter and construction departments.....	7,071.89	9,374.72	11,727.97	21,500.64	20,547.99	23,511.28	27,338.70	27,275.05	24,337.28	27,356.85	200,042.37

1 Expenses for stationery were practically all borne by the Interior Department appropriation for stationery prior to the fiscal year 1923.

TABLE NO. 3.—General summary statement of expenditures for support of St. Elizabeths Hospital—Continued

## EXPENDITURES FOR OPERATION OF MECHANICAL DEPARTMENTS—Continued

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
Tinner department:											
Personal services.....	\$458.34	\$666.66	\$925.00	\$1,533.12	\$2,118.75	\$2,810.62	\$2,045.00	\$2,031.25	\$1,968.53	\$2,735.83	\$17,293.10
Increase of compensation.....		66.66	100.00	249.68	325.68	431.00	314.36	312.25			1,799.63
Materials and supplies.....	646.33	848.59	73.27	1,110.79	1,451.44	1,440.23	739.89	931.71	2,120.08	1,772.16	11,134.49
Small tools.....	28.05			15.95	57.67	46.45	48.01	19.57	7.14	29.29	252.13
Gas used.....									69.16	114.52	183.68
Repairs to equipment.....					8.00		3.75				11.75
Total, tinner department.....	1,132.72	1,581.91	1,098.27	2,909.54	3,961.54	4,728.30	3,151.01	3,294.78	4,164.91	4,651.80	30,674.78
Painting department:											
Personal services.....	4,688.58	2,374.66	5,508.00	8,830.00	8,607.00	8,557.50	8,432.50	8,284.06	12,099.74	11,677.50	79,059.54
Increase of compensation.....		101.80	749.00	2,154.17	1,920.00	1,915.33	1,876.67	1,851.08			10,568.05
Materials and supplies.....	2,890.36	1,830.54	6,978.91	12,066.04	9,304.64	10,624.62	12,127.30	12,061.44	9,223.52	18,760.46	95,867.83
Small tools.....	18.05	14.14	7.16	26.37	8.39	62.62	14.85	78.03		15.40	245.01
Total painting department.....	7,596.99	4,321.14	13,243.07	23,076.58	19,840.03	21,160.07	22,451.32	22,274.61	21,323.26	30,453.36	185,740.43
Electrical department:											
Personal services.....	5,207.99	5,281.02	5,333.56	8,977.65	14,572.27	16,847.51	16,656.99	16,412.62	19,245.51	20,970.01	129,505.13
Increase of compensation.....		119.80	518.64	1,377.76	2,125.55	2,534.11	2,528.34	2,397.62			11,601.82
Materials and supplies.....	8,467.94	2,388.33	5,792.69	25,350.75	8,294.22	12,056.49	7,244.34	9,421.10	7,327.62	8,257.99	94,601.47
Small tools.....	35.33		57.37	417.14	123.74	186.75	71.69	34.34	197.45	38.00	1,161.81
Repairs to equipment.....	10.58		11.28	596.46	453.35	7.00	65.15				1,143.82
Total electrical department.....	13,721.84	7,789.15	11,713.54	36,719.76	25,569.13	31,631.86	26,566.51	28,265.68	26,770.58	29,266.00	238,014.05
Gross total mechanical departments...	123,685.15	160,128.13	244,224.64	325,184.57	367,793.13	295,621.90	366,991.54	307,869.16	301,514.00	333,352.44	2,826,364.66
Appropriations reimbursements.....	1,407.76	173.70	587.86	1,611.61	2,031.81	9.62	17.81	3.38			2.75
						1,806.66	154.38	354.82	1,110.28	317.95	9,590.39
Net total mechanical departments...	122,277.39	159,954.43	243,636.78	323,572.96	365,761.32	293,805.62	366,819.35	307,510.96	300,403.72	333,031.74	2,816,774.27
Equipment purchased:											
Engineer department.....	75.60	52.50	196.77	8,019.19	4,968.72	4,397.55	4,658.41	2,395.07	6,555.03	1,924.86	33,243.70
Fire department.....	1,060.00	1,004.50		2,480.60	2,047.00	437.40	1,038.80	326.38	107.25	173.07	8,675.00
Carpenter and construction departments.....	223.85	22.26		192.59	1,812.99	1,057.00	2,753.40	82.88	441.69	195.00	6,781.66
Tinner department.....				36.03	524.75	69.50			42.90	154.14	827.32
Painting department.....				11.60			66.08	116.50		1,448.93	1,643.11
Electrical department.....	1,489.60	13.20	40.91	6,519.96	8,290.47	730.50	879.59	207.76	130.31	703.92	19,006.22
Total.....	2,849.05	1,092.46	237.68	17,259.97	17,643.93	6,691.95	9,396.28	3,128.59	7,277.18	4,599.92	70,177.01



EXPENDITURES FOR OPERATION OF GARAGE<sup>1</sup>

Personal services.....				\$257.50	\$19,000.00	\$19,019.19	\$20,625.22	\$22,307.72	\$38,920.92	\$39,335.26	\$159,465.81
Increase of compensation.....				39.49	6,000.00	6,339.73	6,875.08	7,435.90			26,690.20
Gasoline.....				633.87	3,706.79	3,250.12	3,359.36	2,457.68			18,514.41
Oil and grease.....					353.84	618.28	591.75	395.85	2,396.69	2,709.90	18,514.41
Tires and tubes.....									219.41	224.63	2,403.76
Supplies and repair parts.....				1,032.00	1,886.34	2,897.94	1,858.60	1,039.81	2,156.11	1,265.78	12,136.58
Small tools.....				598.45	6,749.86	9,091.44	4,161.53	2,954.08	2,347.72	2,198.70	28,101.78
				85.56	370.01	138.59	122.50	114.82	68.54	81.25	981.27
Total.....				2,646.87	38,066.84	41,355.29	37,594.04	36,705.86	40,109.39	45,815.52	248,293.81
Equipment purchased:											
General garage.....				329.00		648.64	599.33	1,958.00	751.95	729.97	5,016.89
Automobiles and trucks.....				291.09		1,397.44		8,330.21	598.45	10,110.74	20,727.93
Tractors.....							421.70				421.70
Total.....				620.09		2,046.08	1,021.03	10,288.21	1,350.40	10,840.71	26,166.52

## EXPENDITURES FOR OPERATION OF GREENHOUSES AND CARE OF LAWNS AND GROUNDS

Personal services.....	\$5,375.37	\$5,398.33	\$5,326.26	\$6,146.61	\$6,099.87	\$6,017.34	\$5,983.60	\$6,279.84	\$15,364.17	\$15,440.00	\$77,431.39
Increase of compensation.....		532.33	1,149.96	2,454.25	2,448.00	2,434.67	2,396.26	2,358.00			13,773.47
Seeds, plants, bulbs, etc.....	283.53	252.48	78.25	1,104.10	618.29	401.32	1,005.92	763.05	824.36	765.73	6,097.03
Miscellaneous supplies.....	568.44	329.80	19.50	2,075.47	1,258.32	1,476.47	1,243.95	590.15	265.41	1,955.10	9,782.61
Small tools.....	118.48	17.88		351.81	220.92	143.87	235.22	121.17	179.09	915.08	2,303.52
Fuel—Anthracite coal <sup>2</sup> .....	1,600.00	1,600.00	2,200.00	4,400.00	1,800.00		3,600.00	6,000.00	2,600.00	5,400.00	29,200.00
Fuel—Bituminous coal.....											2,400.00
Repairs to equipment.....	58.60	105.21		6.14	78.84	90.76	95.23	34.28	76.07	201.77	746.90
Gross total.....	8,004.42	8,236.03	8,773.97	16,538.38	12,524.24	12,964.43	14,560.18	16,146.49	19,309.10	24,677.68	141,734.92
Appropriation reimbursements.....				23.61							23.61
Net total.....	8,004.42	8,236.03	8,773.97	16,514.77	12,524.24	12,964.43	14,560.18	16,146.49	19,309.10	24,677.68	141,711.31
Equipment purchased.....	202.00	35.00		564.15	223.15	330.32	1,298.10	309.08	1,137.07	204.00	4,302.87

<sup>1</sup> In addition to above automotive equipment, there are included in administrative equipment, fiscal year 1917, one electric automobile, costing \$1,725, for the use of the superintendent of St. Elizabeths Hospital; in farm equipment, fiscal year 1922, two Fordson tractors, costing \$1,295; in farm equipment, fiscal year 1923, one Fordson tractor, costing \$421.70; and in the fiscal year 1926, one Farmall tractor, costing \$800; a total of \$4,241.70.

<sup>2</sup> See also cost report for lawns and grounds under "Repairs and improvements" appropriations.

TABLE NO. 3.—General summary statement of expenditures for support of St. Elizabeths Hospital—Continued

## GENERAL HOSPITAL ADMINISTRATION AND OPERATION

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
Invested in equipment:											
Medical division.....	\$380.68	\$85.96	\$1,121.75	\$10,369.94	\$1,664.39	\$6,600.57	\$2,101.00	\$10,788.41	\$6,459.04	\$6,298.89	\$45,870.63
Industrial and occupational.....				379.93	151.50	123.77	1,676.68	7.25		1,214.48	3,553.61
Amusements and entertainments.....	186.90			978.00	7.25	597.00		29.25	12.06	356.38	2,166.84
Kitchens, cafeteria, and bakery.....	2,390.00	381.30	935.65	23,942.93	5,859.48	9,619.23	9,793.44	5,472.74	7,448.35	7,722.48	73,565.60
Farm, garden, and stable.....	2,893.75	316.72	90.00	1,062.71	1,061.72	2,126.25	630.81	851.21	446.43	8,502.79	17,982.39
Household equipment.....	222.69	99.60	567.24	1,155.81	966.84	653.03	1,002.41	497.54	2,146.21	2,088.87	9,400.24
Furniture and floor coverings.....	8,848.35	3,068.21	4,643.94	33,238.93	7,556.12	5,901.35	12,640.76	16,603.15	10,969.44	13,885.66	117,355.91
Laundry equipment.....	2,869.96	665.00	36.00	18,967.96	14,166.71	6,736.79	7,237.43		4,534.90	7,760.83	63,005.58
Administration.....	2,984.90	570.25	9.60	2,738.91	2,185.19	938.50	4,161.47	1,036.43	16,819.06	1,072.08	32,516.39
Mechanical departments.....	2,849.05	1,092.46	237.68	17,259.97	17,643.93	6,691.95	9,396.28	3,128.59	7,277.18	4,599.92	70,177.01
Garage and automobiles.....				620.09		2,046.08	1,021.03	10,288.21	1,356.40	10,840.71	26,166.52
Greenhouses, lawns, and grounds.....	202.00	35.00		564.15	223.15	330.32	1,298.10	309.08	1,137.07	204.00	4,302.87
Sewing and mending rooms.....	90.36		21.27	772.00	854.35		25.92		135.00	296.08	2,194.98
Total.....	23,918.64	6,314.50	7,663.13	112,081.38	52,340.63	42,364.84	50,985.33	49,011.86	58,735.14	64,843.17	468,258.57

TABLE NO. 4.—Summary of expenditures, buildings and grounds, St. Elizabeths Hospital

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Total
With fiscal year limitations:											
(a) Mechanical divisions.....	\$53,550.21	\$54,621.89	\$60,031.84	\$62,993.56	\$86,189.46	\$96,338.50	\$104,726.28	\$106,131.04	\$101,090.80	\$99,109.19	\$824,782.77
(b) Repairs to roadways and walks.....	4,878.73	3,888.83	5,684.16	6,284.38							20,736.10
(c) Construction of new fence.....	10,455.88	3,562.66									14,018.54
(d) Installation of two electric elevators.....	3,447.49										3,447.49
(e) Installation of ice plant (35-ton capacity).....	18,974.23										18,974.23
(f) Furnishing and laying sewer pipe.....		1,215.00	26,704.08								27,919.08
(g) Installation track scales.....			6,998.80								6,998.80
(h) Dairy and cow barn equipment.....						10,129.75					10,129.75
(i) Construction 3 public comfort stations.....						4,532.09					4,532.09
(j) Construction 7 bungalows.....								46,417.69			46,417.69
(k) Construction of propagating building.....									1,655.31		1,655.31
(l) Construction of 2 watch houses.....										2,584.71	2,584.71
(m) Miscellaneous improvements.....			1,397.00	2,500.00		736.00	3,417.61	2,485.00	3,750.00	11,019.74	25,305.35
Subtotal.....	91,306.54	63,288.38	100,815.88	71,777.94	86,189.46	111,736.34	108,143.89	155,033.73	106,496.11	112,713.64	1,007,501.91
Invested in equipment:											
(a) Mechanical equipment.....	1,245.00			8.00		111.90			1,386.00	192.00	2,942.90
(b) Road equipment.....	64.00	1,151.00	43.70								1,258.70
Total.....	92,615.54	64,439.38	100,859.58	71,785.94	86,189.46	111,848.24	108,143.89	155,033.73	107,882.11	112,905.64	1,011,703.51



TABLE No. 4.—Summary of expenditures, buildings and grounds, St. Elizabeths Hospital—Continued

## ANNUAL REPAIRS AND IMPROVEMENTS—Continued

	1917	1918	1919	1922	Total		1922	1924	1925	1926	Total
(d) Electric elevators (2):						(i) Public-comfort stations					
Advertising for bids.....	\$32.50	-----	-----	-----	\$32.50	(3):					
Cement, sand, and gravel.....	171.99	-----	-----	-----	171.99	Personal services.....	\$206.94	-----	-----	-----	\$206.94
Electric door switches.....	32.00	-----	-----	-----	32.00	Increase of compensation.....	38.71	-----	-----	-----	38.71
Elevator in kitchen building, A. B. C. Electric Elevator Co.....	1,870.00	-----	-----	-----	1,870.00	Construction material and supplies.....	1,799.40	-----	-----	-----	1,799.40
Elevator in laundry building, Smith Rea Co.....	1,341.00	-----	-----	-----	1,341.00	Plumbing supplies and fixtures.....	2,487.04	-----	-----	-----	2,487.04
Total.....	3,447.49	-----	-----	-----	3,447.49	Total.....	4,532.09	-----	-----	-----	4,532.09
(e) Installation of ice plant:						(j) Construction of bungalows					
Personal salaries.....	1,770.19	-----	-----	-----	1,770.19	(7):					
Services, consulting engineer.....	48.76	-----	-----	-----	48.76	Personal services.....		\$300.52	-----	-----	300.52
Advertising for bids.....	52.83	-----	-----	-----	52.83	Increase of compensation.....		80.50	-----	-----	80.50
Cement, sand, and gravel.....	899.80	-----	-----	-----	899.80	Advertising for bids.....		108.13	-----	-----	108.13
Insulating material.....	1,422.35	-----	-----	-----	1,422.35	Construction of buildings, B. H. B. Ennis, contractor.....		37,510.00	-----	-----	37,510.00
Pipe, fittings, and valves.....	636.68	-----	-----	-----	636.68	Plumbing and heating.....		5,203.35	-----	-----	5,203.35
Materials and supplies.....	612.87	-----	-----	-----	612.87	Construction material and supplies.....		3,215.19	-----	-----	3,215.19
Asphalt, doors, and flooring, C. A. Barber, contractor.....	753.75	-----	-----	-----	753.75	Total.....		46,417.69	-----	-----	46,417.69
Refrigerating machinery, York Manufacturing Co., contractor.....	12,777.00	-----	-----	-----	12,777.00	(k) Construction of propagating building:					
Total.....	18,974.23	-----	-----	-----	18,974.23	Personal services.....			\$903.15	-----	903.15
(f) Furnishing and laying sewer pipe:						Construction material and supplies.....			544.88	-----	544.88
Advertising for bids.....			\$50.58	-----	50.58	Glass roofing.....			207.28	-----	207.28
Sewer pipe purchased, Continental Construction Co. (\$26,653.50).....		\$1,215.00	26,653.50	-----	27,868.50	Total.....			1,655.31	-----	1,655.31
Total.....		1,215.00	26,704.08	-----	27,919.08	(l) Construction of gatehouses					
(g) Railroad track scales:						(2):					
Advertising for bids.....			71.77	-----	71.77	Personal services.....				\$1,733.96	1,733.96
Concrete and lumber for pit.....			2,227.03	-----	2,227.03	Construction material and supplies.....				850.75	850.75
						Total.....				2,584.71	2,584.71





TABLE NO. 4.—*Summary of expenditures, buildings and grounds, St. Elizabeths Hospital—Continued*

WITHOUT FISCAL YEAR LIMITATION—Continued

	1917	1918	1919	1920	1921	1922	1923	1924	1926	Total
(n) Construction of shop and storehouse—Continued.										
Advertising for bids for elevator				\$35.30						\$35.30
Cost of elevator					\$4,551.00					4,551.00
Total	\$6,962.20	\$4,120.92	\$43.18	7,120.97	7,427.41	\$93.36				25,768.04
(o) Seven semipermanent buildings and furnishings:										
Personal services			673.81							673.81
Increase of compensation			63.88							63.88
Advertising for bids for construction of buildings		146.63	89.10							235.13
Construction of buildings (Oscawana Building Co.)		5,332.07	151,367.93	2,610.00						159,310.00
Heating plant enlargement			14,790.00							14,790.00
Pipe, fittings, and valves			3,646.27							3,646.27
Building materials and supplies			47.95							47.95
Electric cable and supplies		1,273.95								1,273.95
Furnishings—										
Furniture and floor coverings			9,281.95	136.30						9,418.25
Bedding			5,406.00							5,406.00
Kitchen equipment			4,400.85	84.00						4,484.85
China, crockery, and glassware			548.74							548.74
Tin and ironware			80.87							80.87
Cutlery and plated ware			65.04							65.04
Total		6,752.65	190,462.39	2,830.30						200,045.34
(p) Construction of garage:										
Personal services					5,663.85	725.84				6,389.69
Increase of compensation					1,613.60	183.69				1,797.29
Building materials and supplies					5,630.89	56.88				5,687.77
Steel sash and ribbed glass					2,818.75					2,818.75
Total					15,727.09	966.41				16,693.50
(q) Installation of hydrotherapeutic baths:										
Personal services, installing							\$381.20		\$994.37	1,375.57
Increase of compensation							68.25			68.25
Materials and supplies							83.33		807.30	890.63
Cost of hydrotherapeutic apparatus							3,943.20	\$263.42		4,206.62
Total							4,475.98	263.42	1,801.67	6,541.07

TABLE NO. 4.—*Summary of expenditures, buildings and grounds, St. Elizabeths Hospital—Continued*

## BUILDINGS AND GROUNDS, FUNDS WITHOUT YEAR, ST. ELIZABETHS HOSPITAL

	1923	1924	1925	1926	Total
(r) Constructing of sun parlors:					
Personal services.....			\$2,362.75	\$1,920.39	\$4,283.14
Building materials and supplies.....			3,322.39	4,720.45	8,042.84
Glass floor panels.....				1,317.69	1,317.69
Metal guards.....			763.80		763.80
Total.....			6,448.94	7,958.53	14,407.47
<i>Buildings, St. Elizabeths Hospital</i>					
(From funds accrued under acts of Feb. 20, 1905, and Feb. 2, 1909)					
(s) Construction of isolation building:					
Personal services.....		\$1,505.69			1,505.69
Increase of compensation.....		421.89			421.89
Advertising for bids.....	\$125.37				125.37
Blue prints.....	35.00				35.00
Construction of building (Michael Seretto, contractor).....	16,635.00	9,865.00			26,500.00
Bath tubs.....		278.00			278.00
Total.....	16,795.37	12,070.58			28,865.95
(t) Construction of laboratory building:					
Personal services.....		337.47			337.47
Increase of compensation.....		87.79			87.79
Advertising for bids.....	125.37				125.37
Blue prints.....	35.00				35.00
Construction of building (Boyle Robertson Construction Co.).....	26,424.00	72,484.00			98,908.00
Gas service pipe.....		185.33			185.33
Mortuary trays.....		405.00			405.00
Total.....	26,584.37	73,499.59			100,083.96
(u) Extension to power, heating, and lighting plant:					
Services, consulting engineer.....			755.00		755.00
Advertising for bids.....			107.26		107.26
Blue prints.....			40.00		40.00
Building materials and supplies.....			783.00		783.00
Extension to plant, boilers, etc. (V. N. Welamb & Co., contractors), minus 10 per cent retained, \$20,689.46.....			104,164.30	102,730.30	206,894.60
Remodeling opening in chimney.....			1,446.48		1,446.48
Total.....			107,296.04	102,730.30	210,026.34

TABLE 5.—*Statement of expenditures from allotments for medical and hospital treatment United States Veterans' Bureau*

	1925	1926	Total
Medical division:			
Personal services, medical.....	\$6,180.00	\$8,068.34	\$14,248.34
Dental supplies.....	1,313.57	601.56	1,915.13
Repairs to equipment.....	7.50	22.05	29.55
Total.....	7,501.07	8,691.95	16,193.02
Industrial and occupational therapy:			
Personal services.....	25,965.97	20,927.29	46,893.26
Materials and supplies.....	2,908.21	2,131.26	5,039.47
Total.....	28,874.18	23,058.55	51,932.73

TABLE No. 5.—*Statement of expenditures from allotments for medical and hospital treatment United States Veterans—Continued*

	1925	1926	Total
Operation of hennery and garden:			
Personal services.....	\$2,200.00	\$2,200.02	\$4,400.02
Seeds, plants, etc.....	4.80		4.80
Fertilizers.....	30.00		30.00
Forage and feeds.....	2,024.71	1,124.20	3,148.91
Chickens purchased.....	21.08		21.08
Miscellaneous supplies.....	2.80		2.80
Total.....	4,283.39	3,324.22	7,607.61
Administrative:			
Personal services.....	6,109.16	5,729.83	11,838.99
Transfers to retirement fund in excess of pay-roll deductions.....	65.58	76.87	142.45
Telegrams.....	11.46	.25	11.71
Total.....	6,186.20	5,806.95	11,993.15
Gross total.....	46,844.84	40,881.67	
Equipment purchased:			
Medical division.....	259.22	112.81	372.03
Industrial and occupational therapy.....	8.28		8.28
Hennery and garden.....	14.63		14.63
Total.....	282.13	112.81	394.94
Grand total.....	47,126.97	40,994.48	88,121.45

## EXHIBIT C

COMMITMENTS, RELEASES, AND DISCHARGES OF PATIENTS BY  
RESPECTIVE COMMITTING AUTHORITIES

The hospital not having maintained a summary record of commitments, releases, deaths, and transfers of patients by fiscal years for the several committing authorities, the records of the 13,495 individual patients were examined, and the attached tables compiled. These tables show the patients in the hospital on June 30, 1916, number committed by heads of certain executive departments and establishments, and the Commissioners of the District of Columbia, for each succeeding fiscal year, giving under each group sex, color, cases adjudicated and not adjudicated, and diagnosis so far as practicable. For patients discharged, the tables also show for each group sex, color, authority for and condition at time of discharge. Transfers, elopements, and deaths are also shown.

The number under the heading "Without psychosis" includes patients diagnosed by the hospital staff to be in that condition although committed upon certificates alleging unsoundness of mind. The diagnosis in such cases includes those with psychopathic personality without psychosis, those not insane, and those suffering from psychoneurosis, pellagra, and other diseases that apparently were the cause of the mental disturbance that resulted in their commitment to the hospital.



RECAPITULATION

Statement showing number of patients in St. Elizabeths Hospital at close of June 30, 1916, number admitted, discharged, etc., during the period July 1, 1916, to June 30, 1926, and number in hospital at close of June 30, 1926

Committed by—	In hospital June 30, 1916	Admitted July 1, 1916, to June 30, 1926	Discharged, etc., July 1, 1916, to June 30, 1926	In hospital June 30, 1926
Secretary of War.....	623	1,009	1,141	485
Secretary of Navy.....	294	495	496	293
Secretary of Treasury.....	45	284	204	125
District of Columbia Commissioners.....	1,731	4,595	4,102	2,224
United States Soldiers' Home, District of Columbia.....	36	115	106	45
National Home for Disabled Volunteer Soldiers.....	277	151	351	77
Secretary of Interior (prisoners).....	188	265	218	235
Secretary of Interior (Canal Zone).....	0	9	2	7
U. S. Veterans' Bureau.....	17	3,361	2,529	849
Grand total.....	3,211	10,284	9,155	4,340

Statement of patients committed to St. Elizabeths Hospital from all services during the period from July 1, 1916, to June 30, 1926

Fiscal year	Adjudicated								Not adjudicated								Total	
	With psycho- sis		With- out psy- chosis		Feeble- mind- ed		Diag- nosis not shown		With psycho- sis		With- out psy- chosis		Feeble- mind- ed		Diag- nosis not shown			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored		
MALE																		
In hospital July 1—																		
1916.....	478	172	16	13	34	21	44	39	1,262	157	26	1	21	11	55	8	1,936	422
1917.....	105	57	3	1	2	7	7	6	358	52	34	2	4	1	14	4	527	130
1918.....	136	37	6	0	1	4	9	5	543	50	66	10	7	1	8	1	776	108
1919.....	199	48	6	0	0	2	12	6	998	96	139	8	9	0	16	5	1,379	165
1920.....	180	70	3	6	2	2	15	11	377	52	41	6	6	1	18	7	642	155
1921.....	242	83	13	3	2	0	7	6	426	84	68	8	3	1	4	3	765	188
1922.....	184	73	4	1	4	3	12	9	239	39	61	9	6	1	10	0	520	135
1923.....	262	69	8	1	3	0	10	11	321	28	41	11	2	0	6	1	653	121
1924.....	162	49	5	4	5	8	4	4	282	29	36	6	3	0	5	4	502	104
1925.....	144	59	7	2	3	1	6	8	261	29	50	8	0	1	3	1	474	109
1926.....	151	72	2	1	7	4	3	8	255	27	35	7	1	0	9	1	463	120
Total.....	2,243	789	73	32	63	52	129	113	5,322	643	597	76	62	17	148	35	8,637	1,757
FEMALE																		
In hospital July 1—																		
1916.....	356	198	13	17	30	16	26	25	106	44	0	2	9	6	1	5	541	313
1917.....	80	47	5	1	3	0	7	7	41	19	6	1	1	0	1	0	144	75
1918.....	55	27	0	1	0	2	6	10	38	16	5	2	1	0	0	1	105	59
1919.....	62	40	3	0	2	1	9	6	79	26	12	1	1	1	3	0	171	75
1920.....	88	44	4	3	4	0	8	5	52	19	15	2	4	0	2	2	177	76
1921.....	75	44	5	4	0	2	17	13	48	11	13	3	3	1	2	1	163	79
1922.....	77	36	4	3	3	0	12	13	33	13	5	1	0	1	3	1	137	69
1923.....	90	55	2	4	1	0	11	13	33	13	10	3	0	1	1	1	148	90
1924.....	97	40	0	0	1	2	6	11	29	8	7	1	1	1	1	0	142	63
1925.....	88	52	6	0	4	7	6	15	38	9	2	2	2	1	1	2	150	88
1926.....	96	76	0	2	5	6	2	2	36	3	4	0	2	0	1	1	146	90
Total.....	1,164	659	42	36	53	37	113	120	533	181	79	18	24	12	16	14	2,024	1,077

Total male..... 10,394  
Total female..... 3,101

Grand total..... 13,495

*Statement of patients discharged from St. Elizabeths Hospital during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Discharged by hospital						Discharged by order of court						Total	
	Recovered		Improved		Unimproved		Recovered		Improved		Unimproved			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE														
1917.....	140	19	33	8	4	6	8	2	5	1	5	0	195	36
1918.....	216	23	89	11	30	9	2	2	7	1	6	1	350	47
1919.....	372	28	309	13	78	13	4	0	3	2	4	5	770	61
1920.....	230	20	144	8	53	12	1	1	2	1	4	3	434	45
1921.....	142	10	74	2	44	9	5	0	10	1	8	6	283	28
1922.....	147	18	59	3	25	16	5	0	4	0	3	0	243	37
1923.....	133	19	47	6	34	11	0	3	3	0	5	1	222	40
1924.....	112	11	34	10	34	6	2	3	1	0	4	1	187	31
1925.....	82	13	45	5	33	11	1	1	2	3	3	3	166	36
1926.....	79	12	50	2	45	5	0	3	2	0	13	1	189	23
Total.....	1,653	173	884	68	380	98	28	15	39	9	55	21	3,039	384
FEMALE														
1917.....	37	12	7	5	9	9	1	1	4	3	5	1	63	31
1918.....	26	14	6	4	10	6	5	1	3	1	7	0	57	26
1919.....	34	9	11	4	10	5	2	1	2	3	4	4	63	26
1920.....	36	18	12	6	11	4	5	0	5	2	2	2	71	32
1921.....	29	7	8	5	13	5	4	1	3	3	8	2	65	23
1922.....	20	2	9	5	8	2	2	0	5	1	4	0	48	10
1923.....	20	13	5	8	9	0	5	4	2	3	3	2	44	30
1924.....	13	6	7	2	6	2	7	1	2	1	5	2	40	14
1925.....	33	10	19	6	12	4	3	3	0	2	6	2	73	27
1926.....	18	4	9	0	6	2	2	0	0	0	6	1	41	7
Total.....	266	95	93	45	94	39	36	12	26	19	50	16	565	226
Total male.....													3,423	
Total female.....													791	
Grand total.....													4,214	

*Statement of patients transferred, died, and eloped, St. Elizabeths Hospital, during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Transferred						Returned to prison				Deceased						Eloped		Total	
	To other hospitals		To home State		To immigration authorities for deportation		Recovered		Improved		Natural death		Suicide		Killed					
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored		
MALE																				
1917-----	24	1	8	5	2	0	2	0	0	1	255	86	3	0	1	1	23	2	318	96
1918-----	12	3	15	2	2	0	2	0	2	0	200	46	2	0	0	0	48	4	283	55
1919-----	35	6	29	2	10	0	1	0	2	0	321	65	5	0	1	1	43	0	447	74
1920-----	73	8	45	14	24	0	2	2	3	2	169	38	3	0	8	0	39	5	366	69
1921-----	60	10	10	3	28	0	0	3	3	1	128	54	3	0	2	0	37	3	271	74
1922-----	55	7	17	3	5	2	2	2	0	2	157	58	2	0	0	0	23	4	261	78
1923-----	123	3	18	9	5	1	1	0	1	0	139	54	3	0	0	0	22	4	312	71
1924-----	80	50	7	4	5	0	3	1	3	1	125	30	2	0	0	1	20	4	245	91
1925-----	84	4	16	6	6	1	5	0	0	0	130	51	0	0	1	0	43	2	285	64
1926-----	124	6	24	2	7	2	3	0	0	0	136	55	3	0	4	0	39	1	340	66
Total	670	98	189	50	94	6	21	8	14	7	1,760	537	26	0	17	3	337	29	3,128	738
FEMALE																				
1917-----	8	5	5	1	0	0	0	0	0	0	70	38	0	0	0	0	0	1	83	45
1918-----	2	2	5	1	0	0	0	0	0	0	50	32	0	0	0	0	0	0	57	35
1919-----	3	2	20	4	3	0	0	0	0	1	68	35	2	0	0	0	5	1	101	43
1920-----	4	2	13	4	1	0	0	0	0	1	42	31	0	0	0	0	1	0	61	38
1921-----	10	3	14	3	0	0	0	0	0	0	49	21	0	0	0	0	1	0	74	2
1922-----	15	4	9	5	0	0	0	0	0	0	41	25	1	0	0	0	0	1	66	35
1923-----	12	5	5	4	1	0	0	0	0	0	49	35	1	0	0	0	0	1	68	45
1924-----	9	4	10	5	1	0	0	0	0	0	41	27	0	0	0	0	1	0	62	36
1925-----	6	2	4	1	1	0	0	0	0	0	29	25	0	0	0	0	0	1	40	29
1926-----	6	2	6	8	3	0	0	0	0	0	61	42	0	0	0	0	1	1	77	53
Total	75	31	91	35	10	0	0	0	0	2	500	311	4	0	0	0	9	6	689	386

Total male..... 3,866

Total female..... 1,075

Grand total..... 4,941





*Statement of patients, United States Veterans' Bureau, discharged from St. Elizabeths Hospital*

Fiscal year	Originally committed by—								Discharged by hospital						Discharged by order of court						Total	
	Army	Navy	Treasury	District of Columbia	Soldiers' Home	National Home for Disabled Volunteer Soldiers	Interior	Veterans' Bureau	Recovered		Improved		Unimproved		Recovered		Improved		Unimproved		White	Colored
									White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored		
MALE																						
1917	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0
1918	4	64	1	0	0	0	1	0	53	1	13	0	3	0	0	0	0	0	0	69	1	
1919	209	153	11	4	0	0	0	0	187	11	139	7	29	3	1	0	0	0	0	356	21	
1920	79	133	33	1	0	1	0	0	138	10	75	3	19	2	0	0	0	0	0	232	15	
1921	17	60	78	6	0	1	0	2	102	3	40	0	13	1	0	0	3	0	2	160	4	
1922	7	50	76	1	1	0	0	38	118	10	33	0	11	4	0	0	0	0	1	163	14	
1923	14	30	23	5	0	0	2	78	88	12	25	3	21	2	0	0	1	0	0	135	17	
1924	6	23	11	7	0	0	1	47	54	3	16	0	18	3	0	0	1	0	0	89	6	
1925	10	17	8	2	2	0	0	55	52	6	24	4	14	0	0	0	0	0	0	90	10	
1926	3	14	8	2	0	0	0	78	47	5	24	0	23	2	0	0	1	0	3	98	7	
Total	349	544	249	39	3	2	4	298	840	61	389	17	151	17	1	0	6	0	6	0	1,393	95
FEMALE																						
1917	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
1918	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
1919	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	
1920	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	
1921	1	0	1	2	0	0	0	0	3	0	1	0	0	0	0	0	0	0	0	4	0	
1922	0	1	1	0	0	0	0	1	2	0	1	0	0	0	0	0	0	0	0	3	0	
1923	0	0	0	0	0	0	0	2	2	0	0	0	0	0	0	0	0	0	0	2	0	
1924	0	0	0	0	0	0	0	2	1	0	0	0	1	0	0	0	0	0	0	2	0	
1925	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
1926	0	0	0	0	0	0	0	4	2	0	2	0	0	0	0	0	0	0	0	4	0	
Total	1	2	2	4	0	0	0	9	11	1	4	0	1	1	0	0	0	0	0	16	2	

Total male ..... 1,488  
 Total female ..... 18  
 Grand total ..... 1,506

Statement of patients, United States Veterans' Bureau, transferred, died, and eloped, St. Elizabeths Hospital, during the period July 1, 1916, to June 30, 1926

Fiscal year	Originally committed by—								Transferred						Deceased						Eloped		Total					
	Army	Navy	Treasury	District of Columbia	Soldiers' Home	National Home for Disabled Volunteer Soldiers	Interior	Veterans' Bureau	To other hospitals		To home State		To immigration authorities for deportation		Natural death		Suicide		Killed									
									White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored		
MALE																												
1917.....	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0
1918.....	1	6	0	2	0	0	1	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	7	0	10	0
1919.....	14	13	0	3	0	0	0	0	4	0	0	0	0	0	0	0	12	1	0	1	0	0	0	0	5	0	29	1
1920.....	59	32	18	3	0	1	2	0	34	3	25	0	0	0	0	0	25	2	0	0	0	0	0	0	19	0	110	5
1921.....	19	34	36	8	0	0	0	2	32	3	6	0	2	0	0	0	33	6	0	0	0	0	0	0	16	1	89	10
1922.....	13	22	54	5	0	1	0	8	32	3	7	0	0	0	0	0	30	8	2	0	0	0	0	0	20	1	91	12
1923.....	26	40	62	4	0	2	1	41	101	1	8	0	0	0	0	0	37	10	1	0	0	0	0	0	16	1	164	12
1924.....	19	34	48	9	0	0	0	59	67	44	12	1	0	0	0	0	32	6	0	0	0	0	0	0	15	1	117	52
1925.....	13	25	28	4	2	0	0	61	66	2	5	0	0	0	0	0	35	3	0	0	0	1	0	0	18	1	125	8
1926.....	12	29	32	5	1	0	0	89	104	2	14	0	0	0	0	0	23	3	2	0	4	0	0	0	16	0	163	5
Total.....	176	235	278	44	3	4	4	260	441	58	74	1	2	0	0	0	230	41	7	1	12	0	0	0	132	5	899	105
FEMALE																												
1917.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1918.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1919.....	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	2	0	0
1920.....	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0
1921.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1922.....	0	0	2	2	0	0	0	0	3	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	4	0
1923.....	0	0	0	1	0	0	0	2	1	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	2	0
1924.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1925.....	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0
1926.....	0	0	0	0	0	0	0	4	3	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	4	0	0
Total.....	1	0	2	5	0	0	0	7	7	1	1	0	0	0	0	0	5	1	0	0	0	0	0	0	0	13	2	0

Total male..... 1,004  
 Total female..... 15  
 Grand total..... 1,019

Statement of patients committed to St. Elizabeths Hospital upon authority of the Secretary of War during the period from July 1, 1916, to June 30, 1926

Fiscal year	Adjudicated								Not adjudicated								Total	
	With psychosis		Without psychosis		Feeble minded		Diagnosis not shown		With psychosis		Without psychosis		Feeble minded		Diagnosis not shown			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE																		
In hospital July 1—																		
1916.....	19	0	2	0	0	0	1	1	531	34	9	0	1	0	25	0	588	35
1917.....	1	0	0	0	0	0	0	0	136	7	12	1	1	0	2	0	152	8
1918.....	4	0	0	0	1	0	0	0	196	10	40	4	2	0	2	1	245	15
1919.....	16	0	0	0	0	0	0	0	254	15	78	0	1	0	4	1	353	16
1920.....	4	0	0	0	0	0	0	0	22	0	5	0	0	0	1	2	32	2
1921.....	1	1	1	0	0	0	0	0	15	1	1	1	0	0	0	0	18	3
1922.....	4	0	0	0	0	0	0	0	19	2	4	1	0	0	0	0	27	3
1923.....	1	0	0	0	0	0	0	0	18	1	2	0	0	0	1	0	22	1
1924.....	3	0	0	0	0	0	1	0	20	1	2	1	0	0	1	0	27	2
1925.....	1	0	0	0	0	0	1	0	28	0	2	0	0	0	0	0	32	0
1926.....	11	1	0	0	0	0	0	0	21	0	4	0	0	0	0	0	36	1
Total.....	65	2	3	0	1	0	3	1	1,260	71	159	8	5	0	36	4	1,532	86
FEMALE																		
In hospital July 1:																		
1916.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1917.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1918.....	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0
1919.....	1	0	0	0	0	0	0	0	10	0	2	0	0	0	0	0	13	0
1920.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1921.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1922.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1923.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1924.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1925.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1926.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total.....	1	0	0	0	0	0	0	0	11	0	2	0	0	0	0	0	14	0
Total male.....																		1,618
Total female.....																		1

Total male..... 1,618  
 Total female..... 14

Grand total..... 1,632

(In hospital June 30, 1926, 485 males.)

*Statement of patients discharged from St. Elizabeths Hospital (committed upon authority of the Secretary of War) during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Discharged by hospital						Discharged by order of court						Total	
	Recov- ered		Improved		Unim- proved		Recov- ered		Improved		Unim- proved			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE														
1917.....	53	5	26	0	2	0	0	0	0	0	0	0	81	5
1918.....	84	6	49	3	3	2	0	0	2	1	0	0	141	12
1919.....	117	5	125	1	18	0	0	0	0	0	0	1	260	7
1920.....	16	2	40	1	4	0	0	0	0	0	0	0	60	3
1921.....	4	0	6	0	1	0	0	0	0	0	0	0	11	0
1922.....	7	1	3	1	3	0	0	0	0	0	0	0	13	2
1923.....	8	1	4	0	1	0	0	0	0	0	0	0	13	0
1924.....	8	1	1	1	2	0	0	0	0	0	0	0	13	1
1925.....	3	0	3	0	0	0	0	0	0	0	0	0	11	2
1926.....	3	0	7	0	0	0	0	0	0	0	0	0	6	0
Total.....	303	21	264	7	37	2	0	0	2	1	0	1	606	32
FEMALE														
1917.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1918.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1919.....	4	0	4	0	0	0	0	0	0	0	0	0	8	0
1920.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1921.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1922.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1923.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1924.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1925.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1926.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total.....	4	0	4	0	0	0	0	0	0	0	0	0	8	0
Total male.....													638	
Total female.....													8	
Grand total.....													646	





*Statement of patients committed to St. Elizabeths Hospital upon authority of the Secretary of the Navy during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Adjudicated								Not adjudicated								Total	
	With psy- chosis		With- out psy- chosis		Feeble- minded		Diag- nosis not shown		With psycho- sis		With- out psy- chosis		Feeble- minded		Diag- nosis not shown			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE																		
In hospital July 1—																		
1916	26	0	0	0	0	0	0	0	239	19	0	0	1	0	8	1	274	20
1917	0	0	0	0	0	0	0	0	60	8	4	0	0	0	1	0	65	8
1918	4	0	0	0	0	0	0	0	47	2	1	0	1	0	0	0	53	2
1919	3	0	0	0	0	0	0	0	50	2	0	0	2	0	3	0	58	2
1920	0	3	0	0	0	0	0	0	21	1	1	0	0	0	0	0	22	4
1921	2	0	0	0	0	0	0	0	32	1	2	0	0	0	0	0	36	1
1922	1	0	0	0	0	0	0	0	14	0	0	0	1	0	0	0	16	0
1923	1	0	0	0	0	0	0	0	38	0	2	0	0	0	1	0	42	0
1924	5	0	0	0	0	0	0	0	30	2	5	0	1	0	1	0	42	2
1925	5	0	0	0	0	0	0	0	55	2	6	0	0	0	1	0	67	2
1926	4	0	0	0	0	0	0	0	63	2	3	0	0	0	1	0	71	2
Total	51	3	0	0	0	0	0	0	649	39	24	0	6	0	16	1	746	43

Total males, 789.

Females, none.

In hospital June 30, 1926, 293 males.

*Statement of patients discharged from St. Elizabeths Hospital (committed upon authority of the Secretary of the Navy) during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Discharged by hospital						Discharged by order of court						Total	
	Recovered		Improved		Unimproved		Recovered		Improved		Unimproved			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE														
1917-----	23	3	3	0	1	0	0	0	0	0	1	0	23	3
1918-----	10	1	12	0	1	0	0	0	0	0	1	0	24	1
1919-----	27	1	16	0	4	0	0	0	0	0	0	0	47	1
1920-----	14	0	7	2	7	0	0	0	1	0	0	0	29	2
1921-----	7	0	2	0	3	0	0	0	0	0	0	0	12	0
1922-----	7	0	5	0	0	1	0	0	1	0	0	0	13	1
1923-----	11	0	1	0	1	0	0	0	0	0	0	0	13	0
1924-----	21	0	3	0	1	0	0	0	0	0	0	0	25	0
1925-----	12	0	7	0	2	0	0	0	0	0	0	0	21	0
1926-----	11	0	11	0	8	0	0	0	1	0	0	0	31	0
Total---	143	5	67	2	28	1	0	0	3	0	2	0	243	8

Total males, 251.

Females, none.

*Statement of patients transferred, died, and eloped, St. Elizabeths Hospital (committed upon authority of the Secretary of the Navy), during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Transferred						Deceased						Eloped	Total		
	To other hospitals		To home State		To immi- gration authorities for deporta- tion		Natural death		Suicide		Killed					
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE																
1917	3	0	0	0	0	0	31	2	1	0	0	0	2	0	37	2
1918	0	0	0	0	0	0	18	3	1	0	0	0	12	0	31	3
1919	0	0	0	0	0	0	40	1	1	0	0	1	5	0	46	2
1920	3	0	0	0	0	0	14	3	1	0	0	0	4	0	22	3
1921	4	0	0	0	0	0	8	2	2	0	0	0	3	0	17	2
1922	0	0	0	0	0	0	13	1	0	0	0	0	0	0	13	1
1923	1	0	0	0	0	0	9	0	1	0	0	0	0	0	11	0
1924	0	0	0	0	0	0	11	2	0	0	0	0	0	0	11	2
1925	0	0	0	0	0	0	16	3	0	0	0	0	5	0	21	3
1926	6	0	0	0	0	0	8	1	0	0	0	0	3	0	17	1
Total	17	0	0	0	0	0	168	18	7	0	0	1	34	0	226	19

Total males, 245.

Females, none.





Statement of patients discharged from St. Elizabeths Hospital (committed upon authority of the Secretary of the Treasury) during the period from July 1, 1916, to June 30, 1926

Fiscal year	Discharged by hospital						Discharged by order of court						Total	
	Recov- ered		Improved		Unim- proved		Recov- ered		Improved		Unim- proved			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE														
1917	6	2	1	0	0	0	0	0	0	0	0	0	7	2
1918	7	0	2	0	1	0	0	0	0	0	0	0	10	0
1919	4	1	7	0	1	0	0	0	0	0	0	0	12	1
1920	8	0	2	0	0	0	0	0	0	0	0	0	10	0
1921	5	0	6	1	0	0	0	0	0	0	0	0	11	1
1922	2	2	7	1	1	0	0	0	0	0	0	0	10	3
1923	4	1	5	0	0	0	0	0	0	0	0	0	9	1
1924	7	1	2	0	1	0	0	0	0	0	0	0	10	1
1925	6	0	0	0	0	0	0	0	1	0	0	0	7	0
1926	0	0	0	0	1	0	0	0	0	0	0	0	1	0
Total	49	7	32	2	5	0	0	0	1	0	0	0	87	9
FEMALE														
1917	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1918	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1919	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1920	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1921	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1922	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1923	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1924	1	0	0	0	0	0	0	0	0	0	0	0	1	0
1925	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1926	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	1	0	0	0	0	0	0	0	0	0	0	0	1	0
Total male													96	
Total female													1	
Grand total													97	

Statement of patients transferred, died, and eloped, St. Elizabeths Hospital (committed upon authority of the Secretary of the Treasury), during the period from July 1, 1916, to June 30, 1926

Fiscal year	Transferred						Deceased						Eloped		Total	
	To other hospitals		To home State		To immigration authorities for deportation		Natural death		Suicide		Killed					
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE																
1917	0	0	0	0	0	0	5	0	0	0	0	0	0	0	5	0
1918	0	0	1	0	0	0	9	0	0	0	0	0	2	0	12	0
1919	0	0	0	0	0	0	11	0	0	0	0	0	4	0	15	0
1920	1	0	1	0	3	0	5	0	1	0	0	0	0	0	11	0
1921	3	0	2	0	0	0	5	2	0	0	0	0	2	0	12	2
1922	1	0	0	0	2	0	4	1	0	0	0	0	0	0	7	1
1923	3	0	0	0	1	0	12	1	0	0	0	0	1	0	7	1
1924	0	0	0	0	1	0	7	0	0	0	0	0	0	0	8	0
1925	0	0	1	0	0	0	0	0	0	0	0	0	5	0	12	2
1926	0	0	1	0	1	0	2	0	0	0	0	0	2	0	12	0
Total	8	0	6	0	8	0	62	6	0	0	0	0	16	0	101	6

Total males, 107.  
Females, none.

*Statement of patients committed to St. Elizabeths Hospital upon authority of United States Soldiers' Home, District of Columbia, during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Adjudicated								Not adjudicated								Total	
	With psy- chosis		With- out psy- chosis		Feeble- minded		Diagno- sis not shown		With psy- chosis		With- out psy- chosis		Feeble- minded		Diagno- sis not shown			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE																		
In hospital July 1—																		
1916.....	0	0	0	0	0	0	0	0	34	1	0	0	0	0	0	0	35	1
1917.....	0	0	0	0	0	0	0	1	10	0	0	0	0	0	0	2	13	0
1918.....	0	0	0	0	0	0	0	0	11	0	0	0	0	0	0	0	11	0
1919.....	0	0	0	0	0	0	0	0	3	1	1	1	0	0	1	0	5	2
1920.....	0	0	0	0	0	0	0	0	16	1	3	0	0	0	2	0	21	1
1921.....	0	0	0	0	0	0	0	0	6	0	0	0	0	0	0	0	6	0
1922.....	0	0	0	0	0	0	0	0	9	0	2	0	0	0	1	0	12	0
1923.....	0	0	0	0	0	0	0	0	10	0	1	0	0	0	1	0	12	0
1924.....	0	0	0	0	0	0	0	0	15	0	2	0	0	0	0	0	17	0
1925.....	1	0	0	0	0	0	0	0	10	1	0	0	0	0	0	0	11	1
1926.....	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	3	0
Total.....	1	0	0	0	0	0	1	0	127	4	9	1	0	0	8	0	146	5

Total males, 151.

Females, none.

In hospital June 30, 1926, 45 males.

*Statement of patients discharged from St. Elizabeths Hospital (committed upon authority of United States Soldiers' Home, District of Columbia), during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Discharged by hospital						Discharged by order of court						Total	
	Re-covered		Improved		Unimproved		Re-covered		Improved		Unimproved			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE														
1917-----	1	0	1	0	0	0	0	0	0	0	0	0	2	0
1918-----	2	0	0	0	0	0	0	0	0	0	0	0	2	0
1919-----	0	0	1	0	0	0	0	0	0	0	0	0	1	0
1920-----	2	0	2	1	0	0	0	0	0	0	0	0	4	1
1921-----	1	0	0	0	1	0	0	0	0	0	0	0	2	0
1922-----	0	0	1	0	0	0	0	0	0	0	0	0	1	0
1923-----	2	0	0	0	0	0	0	0	0	0	1	0	3	0
1924-----	2	0	1	0	0	0	1	0	0	0	0	0	4	0
1925-----	1	0	0	0	1	1	0	0	0	0	0	0	2	1
1926-----	0	0	1	0	0	0	0	0	0	0	0	0	1	0
Total-----	11	0	7	1	2	1	1	0	0	0	1	0	22	2

Total males, 24.

Females, none.

*Statement of patients transferred, died, and eloped, St. Elizabeths Hospital (committed upon authority of United States Soldiers' Home, District of Columbia), during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Transferred						Deceased						Eloped		Total	
	To other hospitals		To home State		To immi- gration authori- ties for deporta- tion		Natural death		Suicide		Killed					
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE																
1917.....	0	0	0	0	0	0	8	0	0	0	0	0	0	0	8	0
1918.....	1	0	0	0	0	0	8	0	0	0	0	0	0	1	10	0
1919.....	1	0	0	0	0	0	5	0	0	0	0	0	0	1	7	0
1920.....	0	0	0	0	0	0	9	1	0	0	0	0	0	1	10	1
1921.....	0	0	0	0	0	0	5	0	0	0	0	0	0	0	5	0
1922.....	1	0	0	0	0	0	9	0	0	0	0	0	0	0	10	0
1923.....	0	0	0	0	0	0	4	0	0	0	0	0	0	0	4	0
1924.....	4	0	0	0	0	0	6	0	0	0	0	0	0	0	10	0
1925.....	2	0	0	0	0	0	5	0	0	0	0	0	0	1	8	0
1926.....	1	0	0	0	0	0	7	0	0	0	0	0	0	1	9	0
Total.....	10	0	0	0	0	0	66	1	0	0	0	0	5	0	81	1

Total males, 82.  
Females, none.

*Statement of patients committed to St. Elizabeths Hospital upon authority of the National Homes for Disabled Volunteer Soldiers during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Adjudicated								Not adjudicated								Total	
	With psy- chosis		With- out psy- chosis		Feeble- minded		Diag- nosis not shown		With psy- chosis		With- out psy- chosis		Feeble- minded		Diag- nosis not shown			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE																		
In hospital July 1—																		
1916.....	1	0	0	0	0	0	1	0	244	13	5	0	2	0	11	0	264	13
1917.....	0	0	0	0	0	0	0	0	50	6	2	0	1	0	5	1	58	7
1918.....	0	0	0	0	0	0	0	0	16	1	0	0	0	0	2	0	18	1
1919.....	0	0	0	0	0	0	0	0	24	8	0	0	0	0	0	0	24	8
1920.....	0	0	0	0	0	0	0	0	17	1	0	1	1	0	5	1	23	3
1921.....	0	0	0	0	0	0	0	0	5	0	0	0	0	0	1	0	6	0
1922.....	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0
1923.....	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	2	0
1924.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1925.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1926.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total.....	1	0	0	0	0	0	1	0	359	29	7	1	4	0	24	2	396	32

Total males, 428.  
Female, none.  
In hospital June 30, 1926, 77 males.

*Statement of patients discharged from St. Elizabeths Hospital (committed upon authority of the National Homes for Disabled Volunteer Soldiers), during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Discharged by hospital						Discharged by order of court						Total	
	Recovered		Improved		Unimproved		Recovered		Improved		Unimproved			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE														
1917	3	0	0	0	0	1	0	0	0	0	0	0	3	1
1918	5	0	1	0	0	0	0	0	0	0	0	0	6	0
1919	3	0	0	0	0	0	0	0	0	0	0	0	3	0
1920	0	0	0	0	0	1	0	0	0	0	0	0	0	1
1921	1	0	1	0	0	0	0	0	0	0	0	0	2	0
1922	0	0	1	0	0	0	0	0	0	0	0	0	1	0
1923	1	0	0	0	0	0	0	0	0	0	0	0	1	0
1924	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1925	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1926	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	13	0	3	0	0	2	0	0	0	0	0	0	16	2

Total males, 18.

Females, none.

*Statement of patients transferred, died, and eloped, St. Elizabeths Hospital (committed upon authority of the National Homes for Disabled Volunteer Soldiers), during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Transferred						Deceased						Eloped	Total		
	To other hospitals		To home State		To immigration authorities for deportation		Natural death		Suicide		Killed					
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE																
1917	4	0	0	0	0	0	92	7	0	0	0	0	1	0	97	7
1918	1	0	0	0	0	0	51	6	0	0	0	0	3	0	55	6
1919	0	0	0	0	0	0	65	6	0	0	0	0	0	0	65	6
1920	2	0	0	0	0	0	30	3	0	0	1	0	0	0	33	3
1921	1	0	0	0	0	0	16	1	0	0	0	0	0	0	17	1
1922	2	0	0	0	0	0	14	0	0	0	0	0	0	0	16	0
1923	0	0	0	0	0	0	11	2	0	0	0	0	0	0	11	2
1924	0	0	0	0	0	0	4	1	0	0	0	0	0	0	4	1
1925	1	0	0	0	0	0	1	0	0	0	0	0	0	0	2	0
1926	1	0	0	0	0	0	6	0	0	0	0	0	0	0	7	0
Total	12	0	0	0	0	0	290	26	0	0	1	0	4	0	307	26

Total males, 333.

Females, none.



*Statement of patients (prisoners and criminally insane) discharged and deceased, St. Elizabeths Hospital (committed upon authority of the Secretary of the Interior) during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Discharged at expiration of sentence						Returned to prison						Deceased						Total		
	Recov- ered		Im- proved		Unim- proved		Recov- ered		Im- proved		Unim- proved		Natural death		Suicide		Killed				
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored			
MALE																					
1917-----	0	0	1	1	0	0	2	0	0	1	0	0	0	5	5	0	0	1	0	9	7
1918-----	3	0	5	0	0	0	2	0	2	0	0	0	0	2	7	0	0	0	0	14	7
1919-----	1	0	1	0	0	0	1	0	2	0	0	0	0	7	4	0	0	0	0	12	4
1920-----	6	1	2	0	0	0	2	2	2	2	2	0	0	5	1	0	0	0	0	18	6
1921-----	2	0	2	1	0	0	0	0	2	0	1	0	0	1	0	0	0	1	0	9	4
1922-----	0	0	0	0	1	0	2	2	2	2	1	0	0	1	0	0	0	1	0	9	4
1923-----	0	1	0	0	2	0	0	0	0	0	0	0	0	5	0	0	0	0	0	8	4
1924-----	2	0	5	0	1	0	3	1	3	1	0	0	0	1	1	0	0	0	0	4	2
1925-----	1	0	2	1	2	0	3	0	0	0	0	0	0	3	0	0	0	0	0	17	2
1926-----	5	0	1	0	4	0	3	0	0	0	0	0	0	3	4	0	0	0	0	11	5
Total-----	20	2	19	3	10	0	18	7	14	7	0	0	37	28	0	0	2	0	120	47	
FEMALE																					
1917-----	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1
1918-----	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	1	1
1919-----	0	1	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	1	3
1920-----	1	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	2	1
1921-----	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
1922-----	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
1923-----	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
1924-----	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
1925-----	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1926-----	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Total-----	1	1	3	2	1	0	0	0	0	2	0	0	1	4	0	0	0	0	6	9	

Total male..... 167

Total female..... 15

Grand total..... 182

*Statement of patients (prisoners and criminally insane) discharged from St. Elizabeths Hospital (committed upon authority of the Secretary of the Interior) during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Eloped		Discharged by order of court				Transferred				Total	
			Improved		Un-improved		To other insane hospitals		To im-migration authorities for de-portation			
	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored	White	Colored
MALE												
1917	0	1	0	0	0	0	1	0	0	0	1	1
1918	3	1	1	0	0	0	0	0	0	0	4	0
1919	1	0	1	0	0	0	0	1	0	0	2	0
1920	2	1	0	0	0	0	0	0	1	0	3	0
1921	1	0	0	0	0	0	1	0	0	0	1	0
1922	0	0	1	0	0	0	0	0	0	0	0	0
1923	1	2	0	0	0	0	1	0	2	0	4	2
1924	0	0	0	0	0	0	1	0	1	0	1	0
1925	1	0	0	0	2	0	1	0	0	0	2	0
1926	1	0	0	0	2	0	1	0	0	0	4	0
Total	10	6	3	0	2	0	5	1	4	0	24	7
FEMALE												
1917	0	0	0	0	0	0	0	0	0	0	0	0
1918	0	0	0	0	0	0	0	0	0	0	0	0
1919	1	1	0	0	0	0	0	0	0	0	1	0
1920	0	0	0	0	0	0	0	0	0	0	0	0
1921	1	0	0	0	0	0	2	0	0	0	3	0
1922	0	0	0	0	0	0	0	0	0	0	0	0
1923	0	0	0	0	0	0	0	0	0	0	0	0
1924	0	0	0	0	0	0	0	0	0	0	0	0
1925	0	0	0	0	0	0	0	0	0	0	0	0
1926	0	0	0	0	0	0	0	0	0	0	0	0
Total	2	1	0	0	0	0	2	0	0	0	4	1
Total male											31	
Total female											5	
Grand total											36	



*Statement of patients committed to St. Elizabeths Hospital upon authority of the Secretary of the Interior during the period from July 1, 1916, to June 30, 1926 (Canal Zone)*

Fiscal years	Adjudicated					Total	
	With psychosis		Without psychosis		Diagnosis not shown (white)	White	Colored
	White	Colored	White	Colored			
MALE							
In hospital July 1—							
1916.....	0	0	0	0	0	0	0
1917.....	0	0	0	0	0	0	0
1918.....	2	0	0	0	0	2	0
1919.....	0	0	0	0	0	0	0
1920.....	0	0	0	0	0	0	0
1921.....	0	0	0	0	0	0	0
1922.....	0	0	0	1	0	0	1
1923.....	1	0	0	0	0	1	0
1924.....	0	0	0	0	0	0	0
1925.....	1	0	0	0	0	1	0
1926.....	1	0	0	0	1	2	0
Total.....	5	0	0	1	1	6	1
FEMALE							
In hospital July 1—							
1916.....	0	0	0	0	0	0	0
1917.....	0	0	0	0	0	0	0
1918.....	0	0	0	0	0	0	0
1919.....	0	1	1	0	0	1	1
1920.....	0	0	0	0	0	0	0
1921.....	0	0	0	0	0	0	0
1922.....	0	0	0	0	0	0	0
1923.....	0	0	0	0	0	0	0
1924.....	0	0	0	0	0	0	0
1925.....	0	0	0	0	0	0	0
1926.....	0	0	0	0	0	0	0
Total.....	0	1	1	0	0	1	1
Total male..... 7							
Total female..... 2							
Total..... 9							
In hospital June 30, 1926:							
Male..... 6							
Female..... 1							
Total..... 7							

*Statement of patients discharged from St. Elizabeths Hospital (committed upon authority of the Secretary of the Interior) during the period from July 1, 1916, to June 30, 1926 (Canal Zone)*

Male, none.

One white female, in improved condition, was the only patient from the Canal Zone discharged from St. Elizabeths Hospital during the ten-year period; date of discharge, fiscal year 1920.

*Statement of patients transferred, died, and eloped, St. Elizabeths Hospital (committed upon authority of the Secretary of the Interior) during the period from July 1, 1916, to June 30, 1926 (Canal Zone)*

Female, none.

During the fiscal year 1925 one white male patient from the Canal Zone died at St. Elizabeths Hospital.





*Statement of patients discharged from St. Elizabeths Hospital (committed upon authority of the Commissioners District of Columbia) during the period from July 1, 1916, to June 30, 1926*

[illegible]

*Statement of patients transferred, died, and eloped, St. Elizabeths Hospital (committed upon authority of the Commissioners District of Columbia), during the period from July 1, 1916, to June 30, 1926*

Fiscal year	Transferred						Deceased				Eloped		Total	
	To other hospitals		To home State		To immi- gration authorities for depor- tation		Natural death		Suicide (white)	Killed (colored)	White	Colored	White	Colored
	White	Colored	White	Colored	White	Colored	White	Colored						
MALE														
1917-----	11	1	6	5	2	0	82	64	1	0	5	1	107	71
1918-----	6	1	12	2	2	0	67	28	0	0	7	3	94	34
1919-----	8	6	19	2	0	0	110	49	0	0	9	0	146	57
1920-----	12	3	16	12	1	0	57	28	1	0	4	4	91	47
1921-----	17	7	4	3	2	0	47	42	1	0	9	2	80	54
1922-----	18	3	8	2	3	2	66	47	0	0	3	3	98	57
1923-----	16	2	7	9	3	1	64	39	0	0	2	2	92	53
1924-----	7	5	5	3	4	0	49	20	1	1	4	1	70	30
1925-----	9	2	10	6	6	1	51	36	0	0	9	1	85	46
1926-----	7	3	9	2	6	2	66	44	0	0	6	1	94	52
Total---	111	33	96	46	29	6	659	397	4	1	58	18	957	501
FEMALE														
1917-----	8	5	4	1	0	0	70	37	0	0	0	1	81	44
1918-----	2	2	5	1	0	0	50	31	0	0	0	0	57	34
1919-----	2	2	17	4	3	0	65	34	1	0	4	0	92	40
1920-----	4	2	11	4	1	0	42	31	0	0	1	0	59	37
1921-----	8	3	14	3	0	0	49	20	0	0	0	0	71	26
1922-----	12	4	9	5	0	0	40	25	1	0	0	1	62	35
1923-----	11	4	5	4	1	0	49	34	1	0	0	1	67	43
1924-----	9	4	10	5	1	0	41	27	0	0	1	0	62	36
1925-----	6	2	4	1	1	0	28	25	0	0	0	1	39	29
1926-----	3	2	6	7	3	0	60	42	0	0	1	1	73	52
Total---	65	30	85	35	10	0	494	306	3	0	7	5	664	376

Total male..... 1,458  
Total female..... 1,040

Grand total..... 2,498